THE

AMERICAN PRACTITIONER:

A MONTHLY JOURNAL OF

MEDICINE AND SURGERY.

EDITED BY

DAVID W. YANDELL, M. D.

Professor of Clinical Surgery in the University of Louisville,

ANT

THEOPHILUS PARVIN, M. D.

Professor of the Medical and Surgical Diseases of Women in the University of Louisville



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THE AMERICAN PRACTITIONER:

A MONTHLY JOURNAL OF

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THE AMERICAN PRACTITIONER.

DECEMBER, 1871.

Certainly it is excellent discipline for an author to feel that he must say all he has to say in the fewest possible words, or his reader is sure to skip them; and in the plainest possible words, or his reader will certainly misunderstand them. Generally, also, a downright fact may be told in a plain way; and we want downright facts at present more than anything else.—RUSKIN.

Original Communications.

MENSTRUAL PELVI-PERITONITIS.

BY THEOPHILUS PARVIN, M. D.

Inflammation of the pelvic peritoneum is by no means rare among the diseases of women. This truth rests upon clinical experience, and upon post-mortem investigations. The observations of Bernutz, of Aran, of Gosselin, and of Courty, not to mention other eminent names, leave no doubt as to the former proposition; while the autopsies made by Aran, in which he found, in fifty-five out of a hundred peritoneal adhesions, the evidences of a more or less extensive peritonitis, readily establish the latter.

When a physician has passed through one or two-score years in active practice, and avows that he has never seen a case of this disease, we can only think that, like the character in one of Moliére's plays who talked prose all his life without knowing it, he has frequently witnessed the malady, and treated it without truly recognizing it.

Peritoneal inflammation, as a form of puerperal fever, of Vol. IV.—21

course all members of the profession have long recognized; but a similar inflammation, occurring independently of pregnancy or of the puerperal state, having its origin in diverse causes, liable to periodical accessions in intensity, and thus frequently becoming chronic, has not been so long nor is not so generally acknowledged. To no man, nay, we might almost assert not even to all others, is the profession under such obligations for a faithful study and clear exposition of this disorder as to Bernutz. Bernutz and Goupil's "Clinical Memoirs on Diseases of Women," published at Paris in 1862, and of which an abridged translation has been issued by the Sydenham Society, is a mine of most valuable instruction not only upon pelvi-peritonitis,* but also upon some other diseases peculiar to woman.

In estimating the value of Bernutz's labors, especial credit must be given him in two regards: in the first place, for showing, on anatomical grounds and by post-mortem examinations, the comparative infrequency of pelvic cellulitis; and in the second, that pelvi-peritonitis frequently occurred independently of parturition or of abortion, finding its causes in blennorrhagia, in traumatism, or in disorders of menstruation.†

As to the frequency with which inflammation of the pelvic peritoneum results from menstrual derangement, the author referred to found such derangements were the cause in twenty cases out of ninety-nine; that is, slightly more than one fifth.

* Dr. J. Matthews Duncan, in his work "Perimetritis and Parametritis," Edinburgh, 1869, proposes these terms, taken from Virchow, the former signifying inflammation of the uterine peritoneum, the latter inflammation of the cellular tissue, in connection with the uterus, as substitutes for pelvi-peritonitis and pelvic cellulitis. It is doubtful whether this change will ever be generally adopted, and, for our own part, we see no possible gain from its adoption, the terms already in use being sufficiently accurate and explicit.

† It may be interesting to some of our readers to mention that one of the cases illustrative of menstrual pelvi-peritonitis adduced by Bernutz occurred at Louis-ville, in 1834, in the practice of Drs. Talbot and Harrison, and was reported by the latter in the American Journal of the Medical Sciences, 1835.

These derangements are thus divided: three times as the consequence of imperfect menstruation without obvious cause, twice from violent dysmenorrheal pains, and fifteen times from abrupt suppression; this suppression produced by cold nine times, three times from intense mental excitement, and once each from a speculum examination, from cauterization of the cervix, and from repeated sexual intercourse while menstruating.

With these preliminary observations I shall briefly present two cases of menstrual pelvi-peritonitis, and then add some remarks upon the diagnosis and therapeutics of the disorder.

First case. Mrs. S., about thirty years of age, healthy, perfectly regular since weaning her child, which was between three and four years old. On the day that she should be "unwell" got her feet wet in scrubbing, and then going out got completely drenched by a sudden rain. She suffered no immediate, or at least serious, discomfort from her exposure, but the menses did not appear; and four days subsequently she was attacked with sharp pain, at first in her stomach, but soon passed to the hypogastric and left iliac regions, attended with vesical irritability, some nausea, and fever. In a few hours to her other distress there was added great irritability of the rectum, with occasional discharges of glairy mucus. In three days more—that is, just a week after her time there was a sanguineous discharge from the uterus, but neither in quantity nor in continuance at all equal to the menstrual flow, nor did it lessen her suffering. Ten days subsequently I first saw her, and found her lying upon her back, limbs drawn up, respirations not deep, countenance slightly anxious, pulse 110, and complaining of pain in the lower part of the abdomen; this pain aggravated by deep inspiration, by change of position, and by defecation. Upon external examination, the lower part of the abdomen seemed unnaturally full, tender to the touch, but presenting no defined swelling. Vaginal examination with the finger showed that the neck and body of the uterus were thrust forward toward the symphysis pubis, that the lateral cul-de-sacs were free, but the posterior was occupied by a definite and sensitive tumor, descending lower than the neck of the womb, indeed occupying the utero-rectal pouch, and thence greatly encroaching upon the caliber of the vagina superiorly. Between this tumor and the neck of the womb a marked sulcus could be felt, thus preventing mistaking it for a retroflexion.

Four leeches were applied to the neck of the uterus, the bleeding encouraged by free and gentle injections of warm water, and a pill, composed of one fourth of a grain of opium and a grain each of quinine and of extract of conium, was given every hour until the patient was free from pain, to be resumed, however, upon a return of suffering. Warm fomentations were applied to the abdomen, and the bowels were moved not oftener than once in four or five days, and then by copious enemata of warm water rather than by cathartics.

Convalescence was fairly established, but was once interrupted by the patient getting out of bed too soon and walking to an adjoining house. This second attack, however, was comparatively mild, and was treated by the pills previously mentioned, and the application of a cantharidal blister to the lower part of the abdomen. In three months she was well, menstruation natural. Nearly all traces of the tumor had disappeared, but the uterus had not recovered its normal mobility, and probably never will.

Second case. Miss A. first menstruated in her thirteenth year, and the function was regularly and healthily performed until she was eighteen, when, just at the close of a period, she was exposed to the rain, and remained an entire night in damp clothes. At the next period, for the first time in her life, menstruation was scanty and difficult, and then succeeded some years in which amenorrhæa, in one instance continuing for ten months, alternated with dysmenorrhæa. Her general health was materially impaired, and hysteria occasionally

manifested itself. After about five years her condition became somewhat improved; menstruation, though scanty, was regular, and the flow was encouraged by the application of leeches to the cervix. In a year more she married, and for a time her health seemed greatly improved, and there was some increase in the monthly discharge; but at the expiration of six months, just at the time for the commencement of a period, she was attacked with severe pain in the right iliac region, irradiating thence somewhat over the abdomen, and especially up to the right hypochondrium, and down the right limb. She had nausea and obstinate vomiting, some of the time of "bilious" matter. She had fever, with a small but frequent pulse. She lay upon her back, with her limbs drawn up, the abdominal muscles forming a sort of arch. Urination was frequent and difficult. While pain was constant, yet there were frequent paroxysms in which the suffering was more intense. From the uterus there was nothing but an increased mucous discharge.

I did not see her until the third day of her illness, and found her slightly salivated, but with no material abatement of her suffering. In eight days from the commencement of the attack I found upon vaginal examination a tumor, occupying the right lateral and the posterior cul-de-sac, pressing the neck of the uterus anteriorly, and toward the left. Two weeks subsequently a defined and sensitive swelling was discovered in the right iliac region, bearing no relation, however, to the iliac fossa, but forming a sort of "postero-lateral wing" to the uterus. Still two weeks further on, when another menstruation had been due, but failed to appear, a similar tumor manifested itself in the left iliac region; and about the same time the left vaginal cul-de-sac, hitherto free, was encroached upon by a swelling similar to that which had previously been observed in the right.

I shall not occupy time with a detailed statement of the further history of the case, nor of the treatment. Enough

to say that leeches, opium,* blisters, and the administration of tonics, both vegetable and mineral, when required, constituted the most important therapeutic agents used during her weary illness of more than six months; an illness especially marked by monthly aggravations of her disease, inflammatory redoublements, as French authors term them, until the menstrual function was fully restored; and that during her convalescence, when first able to sit up and walk about her room, and then the house, she found the greatest comfort and relief from wearing the abdominal corset advised under such circumstances by Bernutz, and of which a wood-cut and description will be found in the American Practitioner of July, 1870.

I ought to add that in a few months after her recovery she became pregnant, has continued in good health, and is now just on the eve of her confinement.

There is a remark suggested by the history of this case which I wish to make before passing to the subject of diagnosis. It will be remembered that the first tumor lateral to the uterus appeared on the right side, the second upon the left, and that each succeeded a failure in menstruation, but not necessarily a failure in ovulation, or at least attempt at this function. Conceding the theory that the ovaries alternate in action, the one furnishing an ovum one month, the other the next month, and knowing that pelvi-peritonitis most frequently has its immediate starting-point in some abnormal condition of the ovary or oviduct,† may not, in the case in hand, the ovulation have been accomplished or attempted in the right ovary the first month, and in the left the second? There was congestion of one ovary, congestion unrelieved by the monthly hemorrhage from the uterusthe intimate relations of the ovarian and uterine circulation

^{*} In addition to the free internal administration of opium, I had frequently to use morphia hypodermically, this patient's sufferings were at times so severe.

[†] Although in menstrual pelvi-peritonitis the menstrual derangement is the cause of the inflammation, yet it should be sometimes at least regarded as the remote cause—the cause of the cause.

need be but suggested—and inflammation of its peritoneal investment, rapidly extending to contiguous parts of the peritoneum and giving rise to a tumor, succeeded. Next month the same phenomena occurred in the other ovary.

The diagnosis of menstrual pelvi-peritonitis will depend, in the first place, upon some obvious menstrual disorder. This disorder existing, we determine simply the etiology of the affection, and further investigations will be into the symptoms of the inflammatory affection in general. Pain is the most salient phenomenon of peritonitis. "This cry of alarm" is in serous membranes highly characteristic.

A patient with pleuritis describes his sufferings as if a sharp knife were thrust into his side. He hesitates to move, to cough, to take a full inspiration, to do anything which will put the intercostal muscles of the affected side in action. So, too, a woman with pelvi-peritonitis will complain of a pain similarly intense and sharp. Instinct insists not only upon general rest, but also upon local rest, and she lies down on her back, with the limbs drawn up, to relax the abdominal muscles. The pain is in the hypogastric, or in one or both iliac regions, or in all three, and often irradiates over the abdomen, or extends down the inner and the upper portion of one or both limbs. Conjoined with pain are tenderness on pressure, and a sensation of fullness or distension in the lower part of the abdomen. Often there is great irritability of the bladder, and micturition is not only frequent, but difficult and painful. Comparatively seldom the rectum is disturbed; though later on in the disease, if the tumor formed should be retro-uterine, it may be very irritable. Nausea and vomiting quite commonly mark the onset of the disease; and as the latter is frequently of "bilious" matter, and as there may be pain in the right side extending to the liver, and as there is fever, often preceded by a slight chill or chilliness, the disorder is at first sometimes mistaken in malarial regions for an attack of remittent fever.

The formation of a tumor or tumors in one or more of the vaginal cul-de-sacs is a marked characteristic of this form of inflammation. The tumor may generally be found within a week after the onset of the disease, and before this the sac which is to be invaded by this swelling will be more sensitive to pressure, and less elastic than natural. "This sensation of a tumor, which is recognized in one or more of the vaginal cul-de-sacs, is so much more interesting to study, as this sign in pelvi-peritonitis is the analogue of the dullness, or rather the analogue of the deficiency of elasticity on percussion which is found in pleurisy, and as the dullness furnishes one of the most important elements of diagnosis. The tumor is in juxtaposition to the uterus, not part of it, and thus is distinguished from enlargements, partial or general, which that organ may have. It is separated from it by a furrow or sulcus, sometimes very distinct, at others slight; and then it is by the difference of level, of consistence, and of elasticity, and by its special configuration, that it is to be distinguished." (Bernutz.)

Another point to be observed in making a diagnosis is the appreciation of "the displacements, versions or flexions, and rotations which the uterus has undergone," consequent upon the tumor or tumors encroaching upon its normal position, or, further on in the progress of the disease, from inflammatory adhesions.

Finally, not to prolong the consideration of this topic, an exacerbation of inflammation, a "recrudescence," is no uncommon event in pelvi-peritonitis at the accession of the usual monthly periods, especially if the menstrual flow either fails to appear or is scanty.

In the therapeutics of this disorder few remedies are required, yet these used intelligently are wonderfully efficient. The first of these I would mention is local depletion by leeches. Where it is possible, the leeches should be applied directly to the neck of the womb; but when the vagina is so swollen or

sensitive that a speculum can not be well introduced, then their application should be made to the lower part of the abdomen, and at least three times as many should be used: for Bernutz justly observes that four leeches to the cervix accomplish more in depleting the inflamed part than a dozen used externally. The leeching may be repeated on the second and on the third day, if there has been no material improvement in the disease. About the third or fourth day a large camphorated blister.* occupying at least a third more than the sensitive portion of the abdomen, will be found useful if the symptoms are not yielding readily to the previous depletion. Internally, no remedy is so important as opium. Indeed many cases of pelvi-peritonitis will make good recoveries under it alone. I am in the habit of giving the opium, in combination with quinine and the extract of conjum, in the proportions previously mentioned. No one need withhold it for fear of constipating the bowels. This should be desired rather than feared. There are no "peccant humors" to be purged away, and rest for the whole body, the intestinal canal included, is a most important element in the successful treatment of the disease. Once in four or five days is often enough for an evacuation from the bowels; and when this does not occur spontaneously, a copious injection of warm water, especially when thrown high up in the bowel by means of a long tube, will generally have the desired effect. If any laxative is administered by the mouth, it should be one of the milder salines, and then only as an efficient preparation for the better action of the enema, which should succeed it in three or four hours. At the approach of a monthly period efforts should be made to secure a free discharge. These failing, when the

^{*}Smaller blisters upon one or the other iliac regions, as may be indicated, the blistered surface being dressed with morphia, will subsequently be found useful to dissipate the cruel neuralgic pains which in many cases are present after all inflammatory symptoms have subsided. So, too, small blisters similarly applied are useful in hastening the resolution of the tumor when this process seems to be slow or arrested.

menstrual *molimen* is manifest, two or three leeches to the neck of the womb will be of great advantage.

Warm hip-baths after the acute stage of the disease has passed are often exceedingly agreeable to the patient, and are of some value in lessening the long-lingering soreness in the lower part of the abdomen.

Of course, too, once this acute stage is past, the practitioner will give suitable attention to any condition of the womb which may have been the cause of the menstrual disorder. An endo-metritis, a flexion, narrowing of the cervical canal, etc., may require to be cured before the patient can be assured against similar attacks at other monthly periods.

It is important that the patient should be warned against an early resumption of her ordinary avocations. Better too prolonged rest than too early exercise. Probably no well-marked case of pelvi-peritonitis recovers entirely, under the most favorable circumstances, in less than six weeks or two months. The abdominal corset previously mentioned, or some similar bandage, will be found in many cases of great advantage, enabling patients to sit up and walk without discomfort, when not wearing it their suffering would be acute at every movement or jar. Whether, as Bernutz teaches, his bandage immobilizes the uterus, or whether it lifts upward and backward the abdominal viscera, so as to prevent so much pressure upon the recently-inflamed pelvic peritoneum, there can be no question as to its great utility.

It will be observed that in the enumeration of therapeutic agents in this disorder no mention has been made of mercurials. I believe that calomel, or any other mercurial, administered as a cathartic is decidedly injurious, and that the supposed antiphlogistic action of small doses is unnecessary. Opium is enough.

INDIANAPOLIS.

PUERPERAL FEVER.

BY W. W. VINNEDGE, M. D.,

Formerly Resident Physician in the Cincinnati Hospital.

The question of the presence of contagion in puerperal fever is old as well as important. Opinions of leading medical men are at variance on this subject, and not less so now than formerly. Anything then in the way of experience and observation will, I believe, be acceptable, the attention of your readers having recently been called to the subject by the excellent general article in the last number of the Practitioner. I believe experience in the Cincinnati Hospital through two separate epidemic attacks supports the doctrine of contagion, and it is to the course of the disease during these attacks that I desire to call attention.

Puerperal fever first appeared in the hospital during the month of January, 1869. At that time the building had been occupied but a few months, and even then only a portion of it was completed—the south pavilions. At the outbreak of the disease the lying-in room occupied the third floor, Centralavenue side, and was immediately above the male medical ward on the second floor, and the male surgical ward on the first floor. During the time the disease prevailed several cases were reported—I do not now remember how many and two deaths occurred. Soon after the disease manifested itself it was discovered that the ventilation, which was new and had not been thoroughly tested, was faulty, and that foul air from the medical and surgical wards, to a greater or less extent, passed into the obstetric ward. As soon as this was ascertained it was remedied, the patients moved to another portion of the house, and the disease ceased to exist. I may also say that at the time several cases of erysipelas, one of pyæmia, one of gangrene, and one of pyæmia following an

operation for stone, existed in the surgical ward below. This was the explanation of the origin of the outbreak.

The disease appeared a second time in the obstetric ward, on the last day of October, 1869, attacking a primipara with chill four days after delivery. During the time of her attack—one month—seven well-defined cases were treated. No deaths occurred. For particulars and treatment the reader is referred to the Cincinnati Lancet and Observer, Vol. XIII., No. 1, new series.

At this time the obstetric ward occupied the second floor, and was immediately above the female medical ward. As the disease manifested itself, it was ascertained that a severe case of ervsipelas had been treated in the ward last named. It was also known that the ventilation in the female medical ward was defective, and I remember that it was charged that it was the only ward in the house where ventilation failed to approach satisfaction. Whatever the origin of the disease, once it was established it attacked every woman delivered, and passed into the lying-in ward notwithstanding the efforts made to prevent it by window ventilation, the liberal use of disinfectants, and perfect cleanliness. Finally the women not already confined were removed to another part of the house into an unoccupied pavilion, the puerperal patients being left where they were taken ill. Separate house physicians and nurses were assigned to the wards, and the disease disappeared.

Since I have referred to the influence of surgical air upon lying-in patients, I may give another instance having a bearing in the same direction—a slight one, it is true, but still noticeable. Late in the year, during the service of Dr. M. B. Wright, it was noticed that patients in the lying-in pay ward recovered from their confinements slowly, and that red tongue and frequent pulse were not uncommon. The explanation, it seemed to me, was to be found in the female surgical ward being on the floor immediately below.

The wards in this hospital do not communicate with each other except by winding stairway at one end, shut off by doors, one above and one below. At the time the disease prevailed it was asked, did the obstetric assistant have anything to do in the spread of the disease by assisting in post-mortem examinations? To this I say no. A rule of the house positively prevented this, and I do not remember an instance where an assistant in the department of diseases of women and children assisted in an autopsy. Further, it was customary for the physician in attendance during the prevalence of the fever, or even of unpleasant symptoms, to wash his hands in a weak solution of carbolic acid before going from one patient to another.

I will not more than allude to the apparent connection between erysipelas, hospital gangrene, pyæmia, and other low forms of fever, and the disease under consideration. From a clinical lecture, delivered by Dr. George Mendenhall, on puerperal fever, I learn that his experience in the Cincinnati Hospital with the affection was similar to that in the Florence Nightingale lying-in ward, which occupied the third floor of King's College Hospital, London, and which had medical and surgical wards below the obstetric.

In a foot-note in Bedford's Principles and Practice of Obstetrics I find the following deductions from the researches of a German investigator on this subject: "Any fluid matter in a state of putrefaction, communicated by linen, by a sponge, by a catheter, by small particles of the placenta, or even by the atmosphere impregnated with the foul substances, may produce puerperal fever."

Dr. Mendenhall, in the lecture already quoted, says: "With these views of the causes of puerperal fever, and of its pathology, we can hardly avoid the view of contagiousness, at least under certain circumstances."

In the practical application of this question, we confess ourselves able to think of nothing better than to follow the advice of Bedford: "It is the duty of the medical man, when in attendance on a woman attacked with puerperal fever, no matter what his views may be as to the contagiousness of the disease, to use every precaution against translating the affection through his own person. In this precaution nothing will be lost, and much may be gained."

LAFAYETTE, IND.

ON SKIN-GRAFTING IN OLD ULCERS.

BY DUDLEY S. REYNOLDS, M. D.

[READ BEFORE THE LOUISVILLE COLLEGE OF PHYSICIANS AND SURGEONS, SEP-TEMBER 21, 1871.]

The practice of skin-grafting is founded upon a principle that was well understood by many of the most illustrious surgeons of the eighteenth century. It is well known that dentists, until within the last quarter of a century, were in the habit of transplanting teeth from one person to another, which practice "was finally abolished only when it was discovered that it was fraught with danger on account of its liability to transmit disease." Du Hamel, about the middle of the last century, was successful in the experiment of transplanting the spurs of young cocks into their combs. He found that a spur not larger than a hemp-seed would in a few years attain in the comb the length of several inches. John Hunter not only confirmed the results of the experiments of Du Hamel, but found that "if the testicle of a cock be transplanted into the abdomen of a hen, such complete union will occur between them as to permit minute injecting matter readily to pass from the vessels of the one into those of the other." Finally, to put the question of grafting to a more rigid test, Hunter transplanted "a fresh human tooth

into the comb of a cock, where it took root and became firmly fixed, new vessels extending up into the cavity of the fang, as was ascertained by injection after the death of the fowl." Dr. Robert Twiss, in 1841, extracted the fang of an incisor tooth from the mouth of Mary Godfrey, a girl twelve years old, and, taking a tooth from a yearling sheep, broke off a portion of the fang, inserted the sheep's tooth into the girl's mouth, where it grew to such perfection as to be scarcely distinguishable from her natural teeth.

These experiments, though startling at the time of their announcement to the world, had been entirely eclipsed in their curious details by the experiments of M. Reisinger, of Augsburg, who, in 1818, practiced the transplanting of the corneæ of animals; first transplanting the cornea of one eye into the other, he then succeeded in ingrafting the cornea from the eye of one animal into that of another. In some of these experiments the transplanted cornea not only grew, but retained its transparency. Dieffenbach, hearing of Reisinger's success in transplanting corneal tissue, attempted to imitate the experiment, but failed, and for a time the success of Reisinger was discredited.

In the year 1825 Himly and Thome, of Bonn, and Walther, Feldman, and Davis, of Munich, succeeded in confirming the success of Reisinger, which set the question of successfully ingrafting the corneæ entirely beyond controversy, at the same time establishing the fact that transplanted corneæ do sometimes retain the normal curvature, and frequently, in fact generally, the normal transparency.

Too much importance can scarcely be attributed to these brilliant achievements, as it is precisely this kind of experimental knowledge which has taught us how to cure indolent ulcers, a class of affections which has been an "eye-sore" to the medical profession during all time past.

Who will undertake to say that all methods proposed previous to 1869 have not failed in a certain class of cases?

I well remember that at one time Mr. Syme declared that the application of a fly-blister to the sore, followed by the Baynton method of strapping, was infallible in the worst cases of callous ulcers. A few years later the same gentleman announced that his specific had failed him.

I believe that nearly all writers who have spoken on the subject prior to the introduction of skin-grafting are agreed that old varicose ulcers are seldom or never cured outright by any method known to the profession. In 1869 M. Reverdin, of Paris, practiced the operation of ingrafting small bits of skin from remote parts of the body into the base of old sores, where the young grafts grew rapidly, in a short time uniting with the surrounding skin, which resulted in a most speedy and permanent cure of the worst cases. Mr. Pollock, of London, hearing of this, imitated the experiment, and was alike successful. Since then the practice has been pretty generally adopted throughout Europe and America, Prof. Chisholm, of Baltimore, being among the first to adopt it in this country. When I had read Prof. Chisholm's article on this subject, I determined to practice the method at my earliest opportunity.

The only new feature about this practice of ingrafting the dermoid tissues into remote situations is the application of the grafts to diseased surfaces; for example, the base of an old sore. But all will agree that this is but a single step in advance of that of Du Hamel, and the only wonder is that some fertile brain had not suggested the experiment long before M. Reverdin.

It may not be amiss to mention that various methods have been adopted in the application of grafting for the cure of ulcers. Reverdin used small bits of true skin. Most of the British surgeons have adopted this as the best method. Some have, however, practiced the application of grafts composed of epithelium simply. Prof. Hodgen, of St. Louis, has made use of detached scales of epithelium, such as are

frequently seen about the soles of the feet. Remarkable as it may seem. Prof. Hodgen claims to have been very successful in the use of old, dry epithelium. Dr. Hodgen says: "Harry Ellis, a negro, aged fifty-three, presented a ten-year-old indolent ulcer on the leg, two by three inches. On the outer side of the sole of the foot the epithelial layer was certainly one eighth of an inch in thickness, dry and hard as horn, cracked, and filled with dirt. With a knife I scraped off a quantity of this dry, old epithelium, and powdered the surface of the ulcer. At the end of a week the surface presented a whitish, succulent appearance, and in one week more the entire surface, except about one inch square, was coated with a well-marked, dry epithelial layer; and now-three months from the time of the grafting—there is no appearance of pigmentary matter." He relates another case, cured by flakes or large "scales" of sheet epithelium.

Now, if it was necessary to find a covering simply for these old sores, a layer of fragile epithelium grown over the surface of the sore would probably meet the fullest demands of nature in her work of repair. But the demands of nature are inexorable. She has covered the human body with elastic tissue; and when that elastic tissue has been removed or destroyed to an extent beyond the reproductive powers of the adjacent sound skin, then it is that skin-grafting is demanded in the very nature of things; for what else can supply the germs out of which must come the patch, in full possession of the requisite amount of elasticity, to afford a permanent covering? It is well known that every portion of the body not covered with elastic material must be regarded as in a crippled condition, incapable of performing its normal functions; in fact, a kind of hot-bed for the development of disease, remaining only to be set into the most vigorous activity by the slightest causes, not able even to withstand the contraction of the muscles in the immediate neighborhood. Then it follows that an epithelial covering for an old sore does not amount

to more than a temporary convenience, and is in fact no cure at all.

It is interesting to know that Dr. Hodgen has been so fortunate with grafting old, detached epithelium. It shows that at least one of the tissues, when dead, can again be restored to life and health; and I have no doubt some enterprising young surgeon, in the fervor of his enthusiastic search for "new things under the sun," will some bright morning, ere the dawn of another decade, rush forth, with beaming eyes and outstretched hand, proclaiming to the world that the darling ones now cold in death can, by this process of ingrafting the dead upon the living, be fully restored to former health and vigor. For my part I have been less fortunate in grafting dead epithelium. Mere curiosity led me to try it, and each of my three attempts were total failures.

The practice of ingrafting bits of true skin, after including a small portion of the subcutaneous cellular tissue, is the one that I have adopted. That the treatment of old ulcers by skin-grafting has met with almost universal success is a powerful argument in favor of the practice. So far as I am aware, no dissenting voice has yet been raised against it by any gentleman who has taken the pains to test the merits of the practice fairly, as pursued by Reverdin, Pollock, and others. I feel assured that it must take rank among the most brilliant triumphs of plastic surgery. As the results of my experience in skin-grafting differ in no material respect from the published reports of the experience of other gentlemen, I will be spared the task of recording elaborate details, and perhaps the imputation of a reckless enthusiasm.

My first case was that of a lad, fifteen years old, who presented an ulcer, seven by four and a half inches, on the outer aspect of the right thigh, the result of a burn received about eighteen months previous to my visit. On the 14th day of January, 1871, I shaved off the granulations with a bistoury at five points, about equidistant from each other,

on the surface of the sore: I then seized with a pair of dressing forceps, and removed with the scissors, five small bits of sound skin on the inner side of the affected thigh. I now quickly applied each graft as it was removed to the freshened points in the base of the sore. Having completed the insertion of the grafts, a small square of old muslin was applied to each graft, and a large piece of muslin over the whole sore; over this, adhesive strips, arranged to cover and make gentle pressure upon the grafts, which had been arranged in two rows. I next applied a layer of cotton-wool, previously saturated with cold water, over all this a roller bandage, and instructed my patient to keep perfectly quiet. Two days after the operation I removed the dressing, and found the sore that was before quite pale now covered all over with an abundant crop of bright red granulations, the grafts apparently firmly adherent. Dressing was applied as at first, with similar instructions to the patient to keep quiet.

On the 18th I again removed the dressing, which was thoroughly saturated with pus, and found that the skin had extended about a quarter of an inch from the circumference toward the center of the sore. Three of the grafts were perfectly imbedded in their new situation, each however having parted with their scarf-skin; the other two had dropped off. Three new ones were inserted in their stead, in the same manner as at first, and the dressing reäpplied.

In two weeks' time there was little or no difference in the size and appearance of the six grafts, each having grown from the size of a hemp-seed to more than half an inch in diameter. The skin from the circumference had united with four of the grafts, having grown more than one inch in width all round the sore. I was unable to see the patient again until the 2d of March, when I was informed that the sore had been well two weeks, being less than five weeks' time required for the entire healing process to take place.

The grafts never grew larger than three quarters of an

inch in diameter, and looked somewhat paler than the surrounding portions of the cicatrix, of irregular outline, and constituting so many slight depressions in the surface of the limb, possessing in a remarkable degree the characters common to normal skin.

The next case was that of Mr. F., an Irish laborer, who had a thirteen-year-old varicose ulcer on the left shin. The sore, when I first saw it, on the 20th of March, 1871, was quite angry-looking, of very irregular outline, everted edges, and about the size of a ten-cent fractional currency note. I applied carbolic acid in substance, packed the sore full of dry cotton-wool, applied a roller bandage, directing him at the same time to go home and remain quiet for two days, then to return to me. On the 22d he returned, with the appearance of the ulcer much improved. I inserted two small grafts from the arm into the base of the ulcer, in the same manner as described in the first case, making use of the same character of dressing. In four weeks from the date of the grafting Mr. F. was entirely cured, and remains so up to the present time (Aug. 24, 1871). The grafts grew to the size of a nickel only, the main part of the covering for the sore having been furnished from the marginal extension of the skin surrounding the ulcer.

The next case was one which had proved unusually rebellious to all the ordinary modes of treatment, and has given me an extraordinary amount of trouble. The subject is Mrs. T., aged about sixty-eight years, rather corpulent. Early in August, 1870, I was called to amputate the left leg on account of an enormously large ulcer extending over the entire instep, extending from about three inches above the ankle-joint down to a point corresponding with the metatarso-phalangeal articulations, and laterally from the posterior line of the outer malleolus to a corresponding point on the inner side. The leg was greatly hypertrophied, as a result of a phlegmasia that occurred more than thirty years ago. The ulcer was

produced, in 1863, by accidentally striking the limb against the end of a chair-rocker. The sore presented a foul, liver-colored appearance at its base, with everted margin of irregular outline. She stated at my first visit that she had lost all hope of the ulcer being cured, and that she wanted me to amputate the limb. I induced her to permit the application of carbolic acid in substance to the base of the sore; then packing the cavity full of dry cotton-wool, I applied an ordinary bandage. I called the next day and removed the dressing, and found the appearance of the sore much improved. She said the foot had been much less painful during the night than for years past. Encouraged by the improvement of the sore from the carbolic dressing, she besought me to undertake the cure. Having spent ten months of unremitting attention in reducing the ulcer to about one eighth of its former size, I was greatly chagrined to find that sinuses were beginning to form in various directions around the margin of the sore.

Having failed, in November, to obtain the consent of Mrs. T, to the operation of grafting, I announced to her my intention to abandon the case unless she would permit me to exercise my own judgment in its management. She reluctantly consented to the operation of grafting, and on the 21st day of July, 1871, I inserted three small grafts from the arm into the base of the sore, which was at that time about four by two and a half inches in size. The grafts used were but a small fraction larger than the size of a hemp-seed. The dressing and after-treatment were the same as practiced in the case of the lad first detailed. In four weeks after the operation the sore was reduced to about one inch by three quarters of an inch. The grafts were each seven eighths of an inch in diameter. During the first week in September Mrs. T., being without a servant, did the housework. On the 6th of September the sore had attained a size about equal to that of a ten-cent fractional currency note. I inserted on that day seven grafts not larger than pin-heads.

To-day, September 21st, the sore is less than one half the size when the last grafts were inserted. The grafts are growing rapidly, and I expect to see the cure complete within two more weeks.

One other case of an ulcer on the shin completes the record in my practice.

The ulcer was about the size of a silver twenty-five-cent piece. I inserted one graft about the size of a split pea, and in less than four weeks my patient was cured.

Now, as to the size of grafts to be used in any particular case, that will depend upon a variety of circumstances. For instance, if the sore be on the face or about the flexures of the joints, large grafts are certainly preferable, for here the object is not only to cure the sore, but to supply an elastic covering. If the object be to heal an old varicose ulcer, then I should recommend a large number of small grafts, in order to provide against a possible reopening of the sore. The operation in all cases should be performed with sufficient care to insure against the possible presence of pus beneath the graft, care being taken to secure gentle pressure upon each graft; and in no case will it be prudent to allow the first dressing to remain longer than forty-eight hours, lest the bathing of the grafts in pus should destroy their vitality. Shaving off the granulations to receive the grafts is important, as furnishing an entirely raw or fresh surface for their application. The operation may be successfully practiced in this way without regard to the condition of the sore at the time.

A most remarkable fact in connection with the healing process is the very rapid growth of the skin around the margin of the sore, a fact noted by every one who has practiced grafting. So far as I know, the practice has been universally successful, and to-day it ranks among the greatest triumphs of modern surgery.

LOUISVILLE.

ON PUERPERAL CONVULSIONS.

BY LUNSFORD P. YANDELL, M. D.

Few diseases present so frightful a train of symptoms as those which characterize puerperal convulsions. Hardly any other excites so much concern in the physician and the bystanders. The character of its subjects, the circumstances under which it occurs, its suddenness and violence, and the danger in which it involves two lives, all go to invest it with much more than ordinary interest. And this interest is further heightened by the consideration that the disease, in many instances, may be prevented by a timely resort to the proper remedies. Modern researches have rendered it certain that, in most cases, puerperal convulsions are closely connected with disease of the kidneys, which may be easily detected, and can often be relieved before the period at which the danger becomes most imminent.

Puerperal convulsions can not be regarded as a common disease; a physician in general practice may even hope to go through life without encountering a case of it; but its access is so sudden and alarming when it appears that he must be prepared to act on the instant. No time is afforded him to consult authorities. The pressing danger must be met at once. And this gives additional importance to the study of the disease. In regard to its frequency, much difference has been remarked in the experience of different practitioners. Bland, for example, met with but two cases in eighteen hundred and ninety-seven labors, and Merriman with only five in twenty-nine hundred and forty-seven women in their confinement; while Cusack met with it in six out of three hundred and ninety-eight cases of labor, and Churchill, who furnishes these statistics, encountered it twice in six hundred

cases. In ten thousand three hundred and eighty-seven labors, Clark met with nineteen cases of eclampsia, and Collins met with thirty cases in sixteen thousand six hundred and fifty-four parturient women. Convulsions, according to Churchill, occurred in seventy-nine out of thirty-eight thousand three hundred and six women in labor, or in about one in four hundred and eighty-five cases.

Temperament and physical conformation are now believed to exercise but little influence as predisposing causes to eclampsia, and instead of the robust it seems to be females of a cachectic habit who are most liable to its attacks. By far the greater number of cases occur in women between seventeen and thirty-five years of age, and between the eighth and ninth months of uterogestation. It is especially incident to women in their first pregnancy. This is the testimony of nearly all writers on the subject, and most authors speak of primiparæ as being out of all proportion more subject to it; but Ramsbotham insists that women with large families are equally, if not more, liable to be assailed than those in their first labors. While making this statement, however, he reports two thirds of his own cases as having occurred in primiparæ. Of thirty-six cases recorded by Merriman twenty-eight were in mothers with their first children, and of thirty cases related by Collins twenty-nine were in women in their first labor. But it may be doubted whether this gives a fair representation of the case. In my own limited experience the cases have been equally divided between primiparæ and multiparæ. We shall presently see what is probably the cause of the marked difference in the two classes of subjects.

The mortality of puerperal convulsions has varied greatly with different practitioners; but with all, and under every mode of treatment, it has shown itself a fatal disease. In precisely half the cases that have come under my observation death has been the result. Two out of four patients died

in the hands of Maunsell and Gifford each. Merriman lost eight out of thirty-six cases: Collins, five out of thirty: Ramsbotham, ten out of twenty-six; and in one hundred and fifty-two cases collected by Dr. Churchill, forty-two mothers, or more than one fourth of the whole number. were lost. Colombat says the disorder in France terminates fatally in half the cases; but Meigs claims that such is not the case in this country. He believes that the fatalities will not reach beyond fourteen or fifteen per cent, under a judicious management of the attack. It is more fatal in females advanced in years than in young women, owing to the growing tendency to apoplexy from degeneration of the arteries of the brain, which increases with age. The danger from an attack, nearly all writers agree, is greater when it anticipates labor, or comes on during its progress, than when it succeeds it; but Ramsbotham here again differs from the majority, insisting that the danger is greatest when the convulsions follow delivery.

There is reason to believe that the convulsions which pass under the general term "puerperal" refer to different diseases; but the morbid conditions in which the various forms have their origin have not been clearly pointed out. Until within comparatively a recent period these convulsions were supposed to originate in the great nervous centers, as the result of plethora, or of constitutional irritability, or of excitability of the uterus from over-distention; and when the patient died the brain and spinal cord were explored for the seat of the disorder. It is the kidneys that are looked to in our day for the source of the trouble. One of the most important facts in pathology brought to light in the last twenty years is the relation of puerperal convulsions to albuminuria. That there is the closest connection between these morbid phenomena is now universally conceded. Physicians are disappointed not to discover albumen in the urine of their patients laboring under eclampsia. The late lamented Elliot says, in his

Obstetric Clinic, that the urine of all pregnant women at Bellevue Hospital is examined, and that albumen is always looked for. In twenty-seven out of thirty-seven cases of convulsions he found the urine albuminous; and according to Imbert Goubeyre, as quoted by Dr. Bedford, of one hundred and fifty-nine women laboring under albuminuria ninety-four were attacked with convulsions. Nothing could more strikingly illustrate the coincidence of eclampsia and disorder of the kidneys.

But this pathological condition of the kidneys is not the only one upon which puerperal convulsions depend, as two facts abundantly prove. First, it is not always present in these cases; and, in the second place, when it exists, it does not always give rise to convulsions. Elliot reports ten cases in which he detected albumen and the casts indicating renal disorder, the subjects of which nevertheless escaped eclampsia; and he gives three other cases in which eclampsia occurred without any symptom of renal disease. Again, it is undeniable that albuminuria may exist independently of any grave affection of the kidneys. It is no doubt the effect, in many instances, of temporary engorgement, and ceases when that is relieved. It generally disappears rapidly in parturient women after delivery, in some cases even in a few hours after the expulsion of the child; and in cases of albuminous urine, where death has resulted from other diseases, the kidneys have often been found in a healthy condition. Not to multiply references on this point, it may be sufficient to mention that Blot was able to detect only slight renal disease in the autopsy of seven women who had presented before death unmistakable signs of albuminuria.

Besides uræmic poisoning, we must therefore look for other causes of these convulsions. The character of the urine should always be tested by heat, nitric acid, and the microscope; but other sources of irritation should not be lost sight of. Dr. Bedford relates an interesting case in which the convulsions were clearly due to an indigestible meal, and were immediately relieved by an emetic of sulphate of zinc. In another case they were brought on by strangury, resulting from a blister which had been applied for pneumonia.

The greater liability of women in their first pregnancy to albuminuria has been plausibly accounted for by the pressure of the head of the child upon the renal vessels, which must necessarily be greater in primiparæ; and physiologists have shown that by a ligature on the veins of the kidneys an albuminous state of the urine may be induced. Brown-Séguard observed the effect of this pressure in a lady, whose urine was albuminous while she was going about, but ceased to be so on her assuming for some time the recumbent posture. It is a curious fact, bearing also upon this point, that nearly all the cases of eclampsia on record have been furnished by women in whom the presentation was natural. It is stated that in forty-eight thousand three hundred and ninety-seven cases in the Dublin Lying-in Hospital, complicated by malpresentation, convulsions occurred in but a single instance. This disparity is very striking when we consider the difficulty attending many of these cases, and the increased suffering consequent upon the delay, and especially upon turning the child, and the use of instruments. The effect of position upon the renal vessels is manifest. The pressure upon them is necessarily greater when the head presents than it is in any other presentation.

The value of the knowledge that eclampsia is generally associated with a deranged condition of the kidneys has already been referred to, as indicating a method of treatment by which we may hope to arrest the alarming attack. Some writers have suggested that the urea retained in the blood in these renal affections becomes carbonate of ammonia, in this state poisoning both the mother and child, and with a view to correcting this condition have proposed benzoic acid and other chemical reägents. To say the least, it seems doubtful

whether any such chemical changes take place in the blood. and very doubtful whether our remedies are capable of effecting any such reaction. What we know is that the urine is generally albuminous, and that this is always accompanied by some disorder of the kidneys. The urea fails to escape as it ought by its proper emunctories. We seek to eliminate it by restoring the kidneys to a healthy condition. This may be done in some cases, it would seem, simply by observing the recumbent posture, relieving of pressure the renal vessels. But unquestionably the most effectual treatment in such cases is purgation. My old friend, Prof. Cooke, recommended this practice in pregnant women long ago, though he had not albuminuria then in his mind. He published a paper of great interest in the Transylvania Journal of Medicine in 1833, in which he describes a condition of things often present in albuminuria, and relieved by purgatives. "The use of such remedies," he says, "removes the stiffness of the limbs, the inactivity of the body, and the patient moves about with life. This may be in part owing to the removal of some degree of adematous swelling of the limbs, not yet perceptible. It is certain that when such swelling has advanced so as to be manifest a laxative state of the bowels continued as above mentioned will carry it off entirely." His practice was to purge moderately almost daily during the latter months of pregnancy. His favorite remedies were aloes and rhubarb, combined occasionally with calomel, or with jalap or scammony. The saline purgatives are more pleasant in their action, and probably more efficient in relieving congestion of the kidneys; but in some cases minute doses of mercury are highly useful. Diuretics are given with advantage, and first among these I place the bromide of potassium, which not only promotes renal secretion, but has the additional recommendation of allaying nervous excitement and inducing sleep. The tincture of colchicum is also said to diminish the albumen in the urine, and is confided in by many practitioners. The state of the skin should be attended to, and perspiration promoted by moist heat to the surface. Patients may be packed in blankets, and hot air then introduced by means of a portable apparatus; or hot bricks, surrounded by wet cloths, and placed about the bodies of patients, will secure free diaphoresis. Where pain or tenderness in the region of the kidneys is complained of, or blood corpuscles appear in the urine, dry or wet cupping may be resorted to with advantage. While by these measures we endeavor to correct the condition of the blood by eliminating the poison, we must prevent its formation, as far as possible, by regulating the diet of our patients. The generation of urea is favored by animal food, and this ought therefore to be indulged in sparingly, if at all, in cases of albuminuria. At the same time we must be careful to keep up the strength of our patients.

It hardly admits of a question that by this course, and above all by the persistent use of laxatives, an invasion of eclampsia may often be prevented when albumen exists in the urine; and whether the uræmia be the exciting cause of the convulsions, as maintained by Braun, or merely predisposes to them, as held by Matthews Duncan, Scanzoni, and others, the importance of correcting it is the same. The condition is one which is apt to escape the attention of the patient, but should always be looked for by her medical attendant when he has occasion to give her professional advice.

The paroxysm, for the most part, comes on suddenly, and without premonition. Nothing in the health of the woman before her confinement has excited apprehension, and nothing in the character of her labor has caused uneasiness, but in an instant, when all was promising well, she is seized with a terrific convulsion. For this we have no remedy so prompt and efficacious as chloroform. The system brought under its influence is at once relaxed. In the event of a recurrence

of the paroxysm, chloral is to be preferred to chloroform on account of the longer continuance of its effects. Given in doses of thirty grains, and repeated every two or three hours, it will often effectually arrest the convulsions. The following case shows the power of chloroform in checking them during labor, though at last the result was unfortunate.

CASE I. Mrs. W., aged twenty years, when within a few days of her expected confinement with her first child, was attacked with eclampsia. I found her in a second convulsion. and on examination ascertained that labor had commenced. and that the os was considerably dilated. She was at once brought under the influence of chloroform. Fearing that the convulsions might persist, I sent for Prof. Crowe, with reference to the question of delivering by instruments. Prof. C, thought the labor might be safely left to take a natural course, and the chloroform was continued. In five hours she was delivered of a healthy child, without a return of the convulsions, and without knowing when her child was born. She was then left to recover from the influence of the anæsthetic. In a little while she recovered consciousness, recognized her child, and expressed great joy at its birth; but very soon a violent convulsion came on, which was quickly succeeded by others, in spite of the use of chloroform, and she was never afterward conscious. She died next day. Her urine was not examined

I have always regretted that the anæsthesia in this case was not maintained for a longer time. It had so effectually subdued the convulsions during the process of labor that it might, if continued longer, have kept them off altogether.

In the following case chloral was given with the happiest effects:

CASE II. Mrs. S., aged thirty years, the mother of six children, after a labor in every respect natural, complained of headache and pain in the region of the stomach. Seven hours after the birth of her child she was attacked with a

convulsion. I gave her bromide of potassium for the headache and directed chloroform in the event of a second convulsion. In three hours one came on, and her pulse being full and her habit plethoric, I proposed to abstract blood, but gave way to her strong opposition to the measure. Chloral was ordered, with ten grains of calomel and half a grain of podophyllin, and directions were left to send for me should the convulsions return. I heard nothing from her until morning, when a messenger came and informed me that she had had convulsions, at intervals of two hours, during the whole night. She had taken in the mean time sixty grains of chloral. The calomel had not operated. I found her comatose and restless, but able to swallow. An enema was ordered, and she took chloral every two hours, by which she was kept quiet, and no further convulsions occurred. At eight o'clock in the evening she became somewhat conscious. Her recovery was rapid and complete. No albumen could be detected in her urine.

Purgatives are of the greatest value in this disease, and those of an active character are to be preferred. Calomel and podophyllin form an eligible combination. Calomel and jalap may be given, and some practitioners recommend crotonoil. Whether upon the principle of derivation from the brain or of elimination of the poison, this class of remedies must hold a high rank among our curative measures.

Blood-letting, under the reign of the old pathology of puerperal convulsions, was regarded as the one indispensable remedy in their treatment. Whatever else might be advisable, this, by nearly universal consent, took the first place. The lancet was almost invariably resorted to, whether the patient was young or advanced in life, whether she was anæmic or plethoric, and we read with wonder of the quantity of blood abstracted under such circumstances. I have now before me a report of some cases of eclampsia, treated by an old friend and contemporary in Tennessee,

Dr. George Thompson, a distinguished physician of that state, in which the heroic practice is well exemplified. Dr. Thompson made a report of his cases to the Medical Society of Tennessee, in 1851, and they were subsequently published in the Western Journal of Medicine and Surgery for September of that year. In the case which fell last under his care the woman was twenty-five years of age, and just brought to bed with her fourth child. When he saw her she was comatose, but could be partially roused, and then complained of severe pain in the head, restless, face flushed. pulse hard and vibrating. He opened a large orifice in her arm, and took half a gallon of blood, when the pulse at her wrist became nearly imperceptible. A violent convulsion came on after the loss of about twenty ounces of blood, but none occurred afterward, and his patient "was able to attend to the duties of her family as early as after any previous labor." This was Dr. Thompson's eleventh case of eclampsia, and his earlier cases were alike fortunate. His remedy in all was the lancet. He bled few patients less than sixty ounces, and is confident that from some he took twice that quantity. Fearing lest the friends should become alarmed and rebel against his practice, he had more than one of his patients laid upon an open floor, so that the blood might escape between the boards without being noticed. His habit was "to bleed so long as he thought the bleeding did not endanger life." He prefers to cut the temporal arteries in bad cases. His cases were mostly among young women in their first confinement.

We have run into the opposite extreme of all this, and venesection is now the exceptional practice in these cases; and considering that hemorrhage is no uncommon accident of parturition, and that convulsions sometimes supervene upon serious losses of blood at such times; and considering, further, that eclampsia occurs quite as frequently in the anæmic as in the plethoric and robust, and that it is con-

nected in most instances with uraemic poisoning. I think it must be admitted, even by the old practitioners, that the change of method is for the better. Successful as the old plan appears to have been, we can not help confessing that it was carried too far, and it is very certain that the practice is not likely to be revived. But, as Burton in his Anatomy of Melancholy has it, aliud vinum, aliud ebrietas: it is one thing to bleed a patient to the verge of syncope, and in all states of the system, and quite another thing not to bleed at all under any circumstances. I am fully convinced that there are cases of puerperal convulsions in which great benefit is derived from the abstraction of blood. In women of a plethoric habit and robust frame, with a full, bounding pulse, hot skin, and flushed face, I should assuredly recommend the use of the lancet: and I am sure I can not be mistaken about the good effect I have witnessed from blood-letting in such patients. I will give very briefly the history of two cases in which the cure seemed due to venesection.

Case III. Mrs. A., a primipara, thirty-eight years of age, fell into a severe convulsion toward the close of a tedious labor. The os was unyielding, there was preternatural heat of the body, and her pulse was full and hard. She was immediately bled when the convulsion came on, and the blood was suffered to flow until her pulse lost its force and hardness. No second convulsion followed, and she did well. The urine was not examined for albumen.

Case IV. Mrs. L., twenty-five years of age, stout and plethoric, was confined, May 26, 1870, with her second child, Her medical attendant, Dr. Dougherty, used no chloroform, as her labor was short and easy. "When I left her," says Dr. D. in a note to me giving the particulars of the case, "an hour after the completion of her labor, she was a little restless, and complained of some general uneasiness, but there was nothing more to indicate the coming trouble. She told me after her complete recovery, however, that she was

not conscious of anything that transpired from the time I left the room until her recovery from the convulsions." These came on at six o'clock next morning. She had in all about fifteen convulsions. I was called to see her, in consultation with Dr. Dougherty, about noon. She was then under the influence of chloroform, and it was decided to trust to that agent unless the convulsions should return. Two hours afterward I was again called to her in a convulsion. Dr. Dougherty, from the state of her pulse, was inclined to take blood, and she was accordingly bled freely from the arm. No convulsion occurred after the bleeding, and she had a good recovery. Her urine was not examined.

It is evident that a change of mind is going on in the profession with regard to blood-letting, and that the present tendency is to return to the moderate employment of that remedy in a great many diseases, puerperal convulsions among the rest. Having gone too far in one direction half a century ago, physicians have run in our day into the other extreme, and we have almost entirely abandoned the measure upon which our forefathers relied above all others in the treatment of acute affections. The reaction in favor of the old practice, I feel very confident, will conduce to an improved therapeutics; and while we shall never draw blood again after the fashion of practitioners of the last generation, physicians will get to carrying their lancets about with them as of old, and bleed in multitudes of cases where bleeding is not now thought of.

The following is a case in which blood-letting would have been largely practiced by our forefathers, and might possibly have brought about a result different from that which occurred. I attended it in conjunction with Dr. Ronald.

CASE V. Mrs. F., aged twenty-eight years, a primipara, with short neck, robust frame, and apparently in high health, gave birth to a child without chloroform. She complained shortly afterward of severe pain in the head, and it was soon discovered e

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by Dr. Ronald that the case was one of twins Convulsions came on in a few minutes after the birth of the first child, and the doctor proceeded to deliver the second with the forceps, keeping her under the influence of chloroform. She was conscious between the convulsions for a time, and took calomel and jalap. Leeches were applied to the temples, and the chloroform was continued. After forty-eight hours she died, consciousness never having returned after the fourth or fifth convulsion. Urine loaded with albumen.

I saw the following case a few months ago, in consultation with Dr. Given.

CASE VI. Mrs. S., aged twenty-eight years, of a full habit, mother of several children, began to complain of dizziness and headache four or five weeks before her expected confinement. June 12th Dr. G. was called to see her in an attack of cholera morbus, by which she was greatly prostrated. Under the use of stimulants reaction took place; but with it a convulsion occurred, followed by five others in quick succession. Unable as she was to swallow, the Doctor had tincture of cannabis indica and chloral administered by enema, and anæsthesia was maintained for twelve hours by chloroform. The convulsions ceased, and in two days she was able to walk about her room. Her urine, when the attack came on, was loaded with albumen; it was now found to contain comparatively but little. On the 18th, or six days from the occurrence of the first paroxysm, the convulsions returned with greater violence than before. Chloral and tincture of cannabis indica were administered as in the former attack, and chloroform was given at the recurrence of the convulsions. Her urine was less albuminous than when examined at first, but she soon became comatose, and remained so till she died. I saw her, at Dr. G.'s request, on the 18th, when it was impossible to rouse her, and she was unable to swallow. The convulsions had ceased. About ten o'clock that night labor came on, and she was delivered before

morning of a dead child. She died on the evening of the same day.

The induction of labor in puerperal eclampsia is a question to be decided by the practitioner in each case. Delayed long, as in the case just recited, the measure brings no relief. I should incline to bring on labor as a general rule, there being no strong reasons against it.

Manual dilatation may be employed in many cases successfully where the os uteri is not unyielding; or warm douches may be directed against the cervix uteri; or finally Barnes's dilators may be resorted to. The douche, for convenience and efficiency, is probably entitled to the first place among the measures named. It is never painful or dangerous unless carelessly used. The stream of warm water must be directed steadily against and within the rim of the os, and kept up until it becomes dilatable. After this the hand will secure dilatation, and when two fingers can be introduced Barnes's dilators may be employed. The dilators are especially applicable in cases of hemorrhage, or where restlessness prevents the use of the warm-water douche.

LOUISVILLE.

Reviews.

The Principles and Practice of Midwifery, with some Diseases of Women. By ALEX. MILNE, M. D., Edinburgh.

This is one of the most readable and useful volumes it has been our good fortune recently to meet. The author sometimes writes hastily and carelessly; there are occasional mannerisms, or *Milnisms*, which we heartily wish away, and some maxims which we might dispute; but there is a vividness of description, and there is an earnestness of manner, which almost compensate for defects and errors. Besides, and chiefly, the book is quite "up" in the most recent advances in obstetric science and art; e. g., Spiegleberg's confirmation of the theory of Frerichs as to uræmic convulsions is presented, and the management of the third stage of labor as advised by Crédé advocated.

The author seems to be quite at home in obstetric literature, not neglecting, as is sometimes the case with transatlantic writers, American contributions thereto. Thus we find Dr. Milne presenting with approval Dr. Thomas's postural treatment of prolapsed funis, and under the head of cephalic version the following reference is made to Prof. M. B. Wright: "Dr. Wright, of Cincinnati, who has written an excellent paper on this subject, says that we may succeed well by applying the fingers to the top of the shoulders, and the thumb to the axilla, or to such a part as will give us lateral force and then, with the external hand, pressure is made so as to dislodge the breech, and cause it to ascend toward the middle line. The head is thus, without direct force being applied to

it, brought to the brim. In all cases we must ascertain beforehand the true position of the head."

The general teaching of Dr. Milne is less conservative than that of most writers on obstetrics. He advocates an earlier use of forceps in case the second stage is not readily accomplished, active assistance in the third stage, a more liberal diet for the puerperal woman, etc.; and, horror of horrors, abomination of abominations, we can imagine it will be to one of the most vigorous, vivacious, and scholarly of Philadelphia medical writers and obstetric teachers, Dr. M. actually states, ipsissimis verbis: "When the os uteri dilates very slowly—that is, when it remains just about the size of a sixpence or a shilling after several hours' pain—a little gentle dilatation with the belarded finger will help it!"

In his preface Dr. Milne makes this just remark: "There is assuredly a wide and growing belief, not only among the younger practitioners, but also among not a few veteran brethren who have been able to emancipate themselves from the shackles of doubtful if not injurious traditions, that too great delay in the second stage of labor especially has hitherto been inculcated in the text-books, and that had earlier interference been more widely taught and practiced maternal and fetal mortality would have been greatly diminished."

As specimens of the author's occasional familiarities of style, we give the following from page 92:

"Women who marry late in years are very prone to such fancies [imagining themselves pregnant]. Some have gone the length of preparing magnificent raiment—baby-linen of great value—when there was nothing to clothe but wind, nothing to bind but air, which not even a wizard could adorn. Physicians have been engaged (we had nearly said feed, but it is only given to the lawyers to be paid in advance), nurses have been retained—nay, even the baptismal ceremony has been spoken of—and all for mere flatus in the bowel rumbling (not an infant in the womb tumbling), and sometimes not even that."

Again, on page 204, referring to the common use of the nursing-bottle:

"It is manufactured by the thousand, and, like chloroform, goes to the uttermost ends of the earth. The sun sets no more upon it than it does on British territory. Wherever a family travels—to far-off India or to Polynesia—thither the bottle must go, though many other articles should be doomed to remain behind. 'T is the most familiar household-word agoing. We are not sure that this is of good omen—we rather fear that it imports evil, while also evidencing an unnatural state of things."

Occasionally Dr. Milne's impetuous pen disdains even his free prose, and rushes into a brief poetical excursion that might not disgrace Martin F. Tupper, as in these lines:

"Our worthy sires bled rather fast, And now we let the lancet rust; But if to one extreme they ran, Have we not to the other gone?"

Or these:

"The ovary is the usual place of meeting,
Though sometimes in the tubes may be the greeting;
Or, further down, into the very womb;
But there the ovum may but find its tomb:
For, from the ovary when it gets away,
It rapidly commences to decay."

Do the words of Horace, *Poeta nascitur*, *non fit*, recur to the minds of our readers as they finish these specimens of Dr. Milne's poetic exercitations? We are afraid that they may think Dr. M. not a "born" poet, but a *non fit* one.

Even in his prose the author does not always refrain from rhyming rambles, or rambling rhymes, as witness the latter part of the following extract, in which he is speaking of the use of iron in anæmic amenorrhæa: "If we wish the full benefit of the iron, we will give the preparation pure and simple. Never ally a good drug with another, unless it enhances its action or countervails an evil connected with it. In amenorrhæa, then, the aperient, or the cholagogue, which are often indispensable, should be given at a separate time

The rule may be thus expressed: never give the metal until the bowels fairly settle. If this is kept in mind, faster will the anæmia go, and speedier will come the menstrual flow. Biotic force will be achieved, and trust in iron not deceived."

If Richard Swiveller, in the Old Curiosity Shop, had been a doctor, and written a book on obstetrics and diseases of women, then the poetic glory which encircles Dr. Milne's name as he enters the field of professional literature would be but a dim reflection from that of the greater Swiveller.

Surely there is a change coming over the intellect of the Athens of the North if Dr. M.'s style is representative of the Edinburgh school of physicians.

T. P.

The Physician's Visiting-List for 1872. Twenty-first year of its publication. Philadelphia: Lindsay & Blackiston.

This excellent memorandum-book, so necessary to the practitioner and so deservedly popular, is out with its accustomed promptness, and will meet with its usual universal welcome.

The Physician's Dose and Symptom-Book: Containing the doses and uses of all the principal articles of the Materia Medica and Officinal Preparations; also tables of weights and measures, rules to proportion the doses of medicines, common abbreviations used in writing prescriptions, table of poisons, antidotes, indices of diseases and treatment, pharmaceutical preparations, table of symptomatology, outlines of general pathology and therapeutics. By Jos. H. Wythes, M. D., etc. Tenth edition. Philadelphia: Lindsay & Blackiston. 1871. Price \$1.25.

A useful book, and especially valuable to the medical student and the young practitioner. Being in its tenth edition is the best evidence of its popularity. It is a *vade mecum*, brimful of practical information, as its title-page shows. The Druggist's General Receipt-Book: Comprising a copious Veterinary Formulary; with numerous recipes in patent and proprietary medicines, druggists' nostrums, etc.; perfumery and cosmetics; beverages, dietetic articles and condiments; trade chemicals, scientific forceps, and an appendix of useful tables. By Henry Beasly. Seventh American from last London edition. Philadelphia: Lindsay & Blackiston. 1871. Price \$3.50.

A judicious compilation of useful knowledge; a valuable book to druggists. Farmers and housewives may also find in it much interesting and some useful information. The veterinary portion of the work, however, is very faulty; and until the diseases of animals and the efficiency of medicines be more conspicuously comprehended and demonstrated, it is to be hoped that the feathered bipeds and all quadrupeds may be permitted to live in blissful ignorance of physic, and to die without the assistance of bleeding and purging, and the multitudinous dosing so often foolishly and cruelly inflicted upon these helpless creatures.

Practical Midwifery and Obstetrics, including Anæsthetics. By John Tanner, M. D., M. A., LL.D., etc. Philadelphia: J. B. Lippincott & Co.

The lamented author of this little volume was one of the most industrious of English physicians, and, dying at a comparatively early age, had already achieved by his contributions to professional literature an enviable reputation. But his fame has, in our opinion, nothing added to it by the work before us.

Dr. Tanner states, in his preface, that by the aid of this book "the student will be enabled to go to the bedside of the lying-in for the *first time* with perfect confidence in himself, and without the fear of being considered an amateur either by nurse or patient. The qualified practitioner, by reference

to its pages and diagrams, can in a minute or two refresh his memory, and undertake the most difficult obstetric case with its attendant consequences and complications."

These are large promises to be fulfilled in a little volume that can be carried in one's pocket, and which contains less than two hundred pages of *reading*-matter. Nevertheless, doubtless it will be useful, not probably so much for the instruction of the student—for to him it might impart that "little knowledge" which is nowhere a more "dangerous thing" than in medicine—as to the practitioner, reviving in his mind forgotten knowledge.

The author, in his effort to condense and be concise, has sometimes been led to obscurity if not ludicrousness of expression. Thus, on page 74, the last sentence is: "Extract mucus from the child's mouth and wrap it in flannel." "It"—the mucus, the mouth, or the child?

A part of the volume is devoted to the subject of *pessaries*; and in regard to these, contradictory as it may seem, he is an *optimist* rather than a *pessimist*. We think he was mistaken in giving the name of *Hodge* to four out of five of the representations of these instruments found on pages 220 and 221. Certainly they are not the same as any Hodge pessaries we have ever seen; and one we recognize as having been shown us some years ago by Dr. Churchill, of Dublin, as a modification of Dr. Hodge's excellent invention, made by himself, for the treatment of cystocele.

The book is neatly gotten up, and the illustrations are good.

T. P.

Clinic of the Month.

Hypodermic Injections of Water and Saline Solu-TIONS IN MALIGNANT CHOLERA.*—There is every reason to fear an outbreak of cholera during the coming summer. We should therefore be prepared to meet it by all available means. Whatever may be the intimate nature of the affection, authorities generally are agreed that the train of symptoms noticed during collapse is owing to the loss of fluids sustained by the blood during the anterior stage of vomiting and purging. The obvious indication, of course, is either to arrest such loss by means acting on the surfaces from which it occurs, or to supply the system with the wanting ingredients through other channels. The utter futility of all efforts to arrest the discharges by opiates, astringents, etc., is but too well known. For supplying water and salines to the blood there are various ways, chief among them being the avenues of the stomach and rectum. A recent writer in the Lancet contends that the principle upon which this practice depends is most rational, and in accordance with the pathology of the disease. objection to it is that we are apt to be defeated in our measures by the supplied fluids being thrown off immediately during the acts of vomiting and purging.

The writer of this short notice would endeavor to obviate this difficulty by suggesting a trial of hypodermic injections of pure water or dilute saline solutions into various parts of the body. During collapse there is little or no loss of fluids; but such collapse is due to that which has already occurred.

^{*}The following note from our friend, Dr. Coleman Rogers, should have been inserted in "Notes and Queries."—Eds. Am. Prac.

There is a calm which is most favorable to the use of restoratives, if the irritable condition of the intestinal mucous membrane would permit it.

By using hypodermic injections of a drachm at a time over different portions of the skin, an ounce or two of water might be introduced into the system every hour or so, or enough to bridge the patient over until reaction begins to be established. Such injections might be used alone or as adjuvants to draughts by the stomach and injections by the rectum. Pure distilled water, or water holding in solution a trifling amount of salines, would be readily absorbed. Even if abscesses should occur from multiple injections, that danger is certainly preferable to death of the subject.

We have never seen this practice noticed before, and merely give it as a suggestion, which the profession may take for what it is worth.

C. R.

TREATMENT OF WOUNDS.—Dr. John Swift Walker writes on the above subject, in the Practitioner, as follows:

- Simple incised wound of the scalp. After shaving the surrounding margin and inserting a suture (if large, a sine quâ non), freely apply Richardson's styptic colloid, over this a pad of carded wool. In a few days the application of the solution will be again required, and a fresh piece of wool. For simple incised wounds Richardson's solution is a very valuable addition to our materia medica, but only to be used as collodion or plaster to hold the two surfaces of a wound in position. It promotes union by the first intention, and if it does not so unite, the wound is not so gaping, nor has it so large a cicatrix.

Amputation of arm or leg. Sponge out the wound thoroughly with chloride of zinc, one half drachm, to one ounce of water; then let all applications be quite dry for the first two or three days. As soon as there is the least secretion of pus, take a Higginson's syringe and wash out the flaps

with a strong solution of Condy's fluid, say one ounce to ten ounces of water; apply strapping, and cover the wound with a small piece of lint wetted with a lotion of two drachms carbolic acid, two drachms liq. potassæ, and six ounces of water; cover with a piece of gutta-percha tissue, and continue until healed, surrounding the edges or flaps with a little pad of carded lint.

Ulcer of the leg. If it is a large, flabby ulcer, secreting a large quantity of pus, nothing is so good for compressing the granulations and checking the secretion of pus as the carded wool or marine lint; but after it has fulfilled its object a change of treatment, by the application of either a little dry precipitated chalk, zinc ointment, or zinc lotion, will heal it in a few days, with rest and bandaging. The marine lint is a very excellent application for a sinus after the removal of necrosed bone, and facilitates its closing with very little secretion of pus. Its tarry smell seems, in his opinion, to disinfect all ulcerating surfaces, but the application must not be continued too long, as the wool seems to contract the granulations, if such a term may be used.

The Thermometer.—Dr. Z. C. McElroy, of Zanesville, Ohio, in a carefully-prepared article on this instrument read before the Muskingum County Medical Society, sums up the teachings of the instrument as follows: I. The thermometer, in connection with previous history and present rational symptoms, in any given case whatever, inasmuch as it reveals the actual condition of motion—that is, chemical changes in the material of molecular forms of structure or design or material, ascending to or descending from forms of structure—is an instrument of as much precision and certainty as any employed by civil engineers and mechanics in our own times.

2. Considered singly, it holds the first and highest place among all the means at our command for making positive diagnosis, based on the actual condition of molecular work

or motion in the living body. 3. It holds the highest place for making correct prognosis and unerring therapeutical guidance in all pathological states, with ranges of temperature above or below the physiological standard. Finally, that the numbers in the table or on the thermometer scale opposite to those marking degrees of temperature represent, tentatively, the value of variations of temperature in pathological states ranging above or below the physiological standard, reference being had to the points at which molecular forms of structure are losing or lost, and, consequently, death.

SOME OF THE ILL EFFECTS OF BROWIDE OF POTASSIUM -Dr. T. O. Wood, in the British Medical Journal for October, 1871, says that the most dangerous effect of this drug is when, after a course of comparatively small doses, which do not seem to be taking any great hold upon the system generally, or upon the mental symptoms to control which it is given, it suddenly, and without apparent cause or warning, displays its cumulative effect, and rapidly reduces the patient to a condition of great bodily prostration, and completely alters the character of the mental symptoms. This physical prostration is at once evident. There is great muscular debility, dimness of sight, with dilated pupils; irregular gait, the patient reeling as though intoxicated; while nausea, vomiting, or purgation, with abdominal pain of a dull aching character, may also be present; the breath having a disagreeable odor, which seems peculiar to those who have been for any length of time under the influence of the bromide. Its effect upon the mental symptoms is no less marked. The patient who has been violently excited, glorifying in his imaginary power of body and mind, becomes desponding, sullen, melancholic, and frequently lachrymose, often even despairing. One patient, who was discharged from this asylum "recovered," has since told me that he knew and felt for some time afterward the effect of the medicine upon his mind.

PARACENTESIS THORACIS.—In St. George's Hospital Reports for 1870, Dr. Henry W. Fuller, after briefly referring to the advances made within the past twenty-five years in the general treatment of pleurisy, speaks of paracentesis of the chest in the following admirably practical way:

"Nowadays the folly of unduly deferring the operation is clearly recognized, and the tendency is to operate prematurely. before the improbability of producing absorption of the fluid has been ascertained, rather than to subject the patient to unnecessary delay. But there are certain points relative to the operation about which even now erroneous notions are entertained. The fallacious dread as to the admission of air into the pleural cavity, which formerly exercised such a pernicious sway as almost to preclude the operation of paracentesis, even now often leads to the failure of the operation. Under the impression that the momentary admission of air will set up fresh inflammatory action in the pleura, or will injuriously modify existing inflammation, mechanical contrivances of various kinds have been employed to draw off the fluid from the chest without admitting air. The chest has been tapped under water; elastic tubes have been attached to the canula, and made to terminate under water; air-tight elastic bags have been attached to the canula, and various syringes have been made use of, connected with an elaborate system of stop-cocks. But whatever their form or precise character, they have one object in common-namely, to prevent the admission of air; and their advocates have asserted not only that they affect their object, but that the chest may be readily emptied of its fluid contents by their agency. My objections to their use are both practical and theoretical. I object to their employment, first, because they are unnecessary, and complicate a very simple and harmless operation; second, because the admission of air during the process of tapping causes no injury to the patient; third, because it is impossible by any contrivance to prevent the admission of a

certain quantity of air during the withdrawal of the canula, and therefore, even on theoretical grounds, there can be no valid reason against the admission of a larger quantity; fourth, because they mostly occasion unnecessary pain, and when suction-syringes are employed, a forcible strain is put on the parts, which is not only felt and complained of by the patient, but in some instances sets up fresh and serious local inflammation: fifth, because, although a certain quantity of fluid may be drawn off, it is physically impossible to empty the chest by their agency, and observation at the bedside has convinced me that recovery takes place less frequently when a small quantity only of the fluid is drawn off than when the chest is thoroughly emptied. On one of these points only will I make any further remark - viz., the impossibility in most instances of emptying the chest without the admission of air. When effusion into the chest has taken place rapidly. and tapping is had recourse to early, while the lung is still capable of expanding freely, it might be possible to evacuate the fluid contents of the chest without admitting air, if only some mechanical means could be devised for the purpose. In the case here suggested the lung would expand to fill up the space previously occupied by the fluid. But in many instances which occur in practice the pleurisy is of old standing; the lung has been compressed by fluid for weeks or even months; it is carnified, and incapable of speedy expansion; in many instances it is so bound down by firm adhesions that expansion can only be brought about by the natural inspiratory efforts, after a period of many months. In these cases, which are very numerous, it is simply impossible, whether by a suction-syringe or by any other means, to draw off more than a small proportion of fluid without the admission of air. The chest is a closed cavity, like a cask; and just as it is impossible to empty a cask by tapping it without admitting air, so also is it in respect to the chest. The only difference between the two cases is occasioned by the rigidity of the walls of the cavity in the one case, and by their pliability and vielding character in the other. The walls of the cask being rigid, its fluid contents will run out only to the extent to which air can find admission to supply their place; whereas the walls of the pleural cavity will yield in some measure to supply the place of fluid which is drawn off. The chest-walls will fall in, the diaphragm will rise, the mediastinum will encroach on the affected side; and up to the point to which they are capable of yielding there is no necessity for the admission of air, inasmuch as by their displacement the space previously occupied by the fluid which is drawn off is at once filled up. But, provided the lung is permanently or even temporarily incapable of expanding, it is physically certain that without the admission of air the fluid contents of the pleural cavity can only be drawn off to the extent to which the walls of the cavity are capable of falling in to supply the place of the fluid withdrawn. If, in contravention of this physical law, an attempt is made by forcible suction-syringes to draw off still more of the fluid, injury to the patient must ensue; for there must be a forcible dragging and stretching of the walls of the chest, or of the lung itself, corresponding to the extra amount of fluid withdrawn. And as all mechanical violence is necessarily hurtful, it is obvious that in using forcible suction a considerable risk of injuring the patient is incurred, without the slightest corresponding advantage.

"Thus, then, I come to the conclusion, on theoretical grounds, that all mechanical contrivances devised to exclude air, or to exercise forcible suction of the fluid contents of the chest, are useless, or worse than useless; and this conclusion has been confirmed by my bedside experience, for I have seen patients injured in this manner. On the other hand, I maintain that the temporary admission of air is of little or no importance; and that, if only a free opening is made into the lower part of the chest, whether by a full-sized trocar or

a scalpel, the operation of tapping is a simple one, and almost uniformly successful.

"From the time of my appointment as physician to St. George's Hospital I have tapped every case of pleurisy which has come under my care, in which, either from the urgency of the symptoms or the difficulty experienced in producing absorption of the fluid, recourse to more active measures seemed desirable; and out of the large number of cases in which tapping has been performed, one only has proved fatal. Within the last six months you have seen four of my cases tapped. No attempt was made to exclude the air during the operation, and yet you know how rapidly and satisfactorily they all recovered.

"My advice then, founded on large bedside experience, may be summarized thus: I. Tap whenever dyspnœa is very urgent, or as soon as it becomes evident that remedies fail to produce absorption of the fluid in the chest; 2. Tap as low down as possible, and make a free opening, allowing the chest to empty itself thoroughly; 3. So far as possible, avoid causing any local irritation; 4. If the fluid withdrawn is serous or sero-sanguineous, close the opening with carbolic plaster as soon as the operation is concluded; if, on the contrary, the fluid is purulent, adopt some means to prevent the wound from closing, and take care that the matter is allowed to drain off as fast as it is formed; 5. After the operation support the patient by bark and good nourishment, and for a day or two give him opium, if necessary.

CALABAR-BEAN IN CHOREA.— The same author, having tried the bean in seven consecutive cases of chorea, says of it that he is forced to the conclusion that whatever other claims the physostigma may have to be regarded as a valuable internal remedy, it has none as a curative agent in chorea; and that the improvement which was observed to follow its administration in the two or three cases previously recorded

resulted probably from the careful regulation of the diet and the general improvement of the health which accompanied the patients' residence in hospital.

VALVULAR MURMURS.—Dr. Fuller is clearly of the opinion that the term functional, as applied to valvular murmurs, requires still further extension; and that cases of functional disturbance of the heart's action sometimes occur, accompanied by intense murmur, which in the closest manner simulates serious organic valvular mischief. He then adds: "Be not over-hasty in hazarding a prognosis when you are called to a patient suffering from valvular disease of the heart. Several examinations, conducted at considerable intervals, will often be needed to determine with certainty whether a murmur is organic or functional; and even when a decision on this point has been arrived at, the true bearing of the murmur, and the practical importance of the lesion which the murmur denotes, the degree to which it interferes with the circulation, and the rapidity therefore with which it will induce hypertrophy and dilatation, and lead to dropsy. dyspnœa, and death, are only to be ascertained, even approximately, by carefully noting the condition of the heart as regards its sounds, its impulse, and the position of its apexbeat, at several examinations, conducted at intervals of three or four months. If after some months of observation the impulse of the heart becomes more forcible, and the apexbeat lower in the chest, the prognosis ought to be more unfavorable than the mere character of the murmur may have seemed at first to warrant; whereas if an opposite tendency is observed—if at each successive examination the turbulence of the heart's action and the force of its impulse are found to be lessening, and the loudness and roughness of the murmur to be diminishing; and if, further, the apex continues to pulsate almost in its natural position, the opinion may be given that the obstruction to the circulation is not great, and probably will not tend, rapidly at least, to a fatal issue; nay more, that if due caution be taken, repair may possibly be effected to a very great extent, and that the patient may live through a long series of years in the enjoyment of very tolerable health."

THE SECRETIONS AS GUIDES TO TREATMENT.—The following, from the same source, will accord with the views of at least the older of our readers:

"There is no point on which the failure of treatment so frequently depends as upon a neglect to investigate the character of the secretions, and to prescribe according to their monitions. Nowadays we meet with far fewer instances of mistaken diagnosis than of misdirected treatment. It is the fashion or the folly of the age to regard the diagnosis of disease as infinitely more important than a knowledge of how to treat and relieve it; and those who would blush at their inability to describe the precise nature of any disorder, and of the causes which are supposed to produce it, think little of their inability to check its progress. It is not surprising therefore that little heed is too often paid to the secretions the landmarks which guided our forefathers to successful practice-or that cases should frequently come before us in the wards in which, for lack of a due recognition of these landmarks, the treatment which has been adopted has utterly failed. Let me take as an example the case of a man at present in the Cambridge ward, who was admitted suffering from anasarca, occasioned by a weak and dilated heart. In addition to extensive dropsy of the extremities, he had urgent dyspnæa with orthopnæa, congestion of the lungs, effusion into the pleural cavity, engorgement of the liver, with palecolored fecal evacuations, and scanty, loaded, non-albuminous urine, tympanitic distension of the abdomen, and slight effusion into the abdominal cavity-the ordinary assemblage of symptoms which result from long-continued interference with the central organ of the circulation. Before I saw him he had taken salines with digitalis, squills, scoparium, and other diuretics; but his urine had not increased in quantity. and his symptoms had been gradually increasing in severity. This was his condition when he was admitted into the hospital. Having regard to the pale color of his motions. I felt convinced that no real good could be effected unless a free flow of bile could be induced; and that the failure of the treatment he had undergone before admission into the hospital depended principally, if not solely, upon the neglect to stimulate the action of the liver and the secreting apparatus of the bowels. I therefore prescribed five grains of the compound digitalis pill—containing three grains of blue pill, a grain of squills, and half a grain of digitalis—three times a day, and within three days he had begun to improve. Before the end of a week the motions had assumed a healthy color, the quantity of urine was trebled, the flatulence had almost disappeared. the anasarca was rapidly decreasing, and the dyspnœa subsiding. Indeed, it was obvious that the very medicines which before had proved inoperative had become active agents for good as soon as the secreting apparatus of the liver and bowels had been stimulated to healthy action.

"Take another class of cases. It sometimes happens that patients are admitted suffering from ague, with which they have been afflicted for many weeks. They have taken quinine perseveringly, but have not obtained relief. On examination the cause is at once apparent. Their internal organs are in a state of engorgement, and consequently are sluggish. Their bowels are costive, and their motions unhealthy. In these cases the administration of remedies calculated to stimulate the viscera to action is all that is needed to restore them to health. Two or three doses of colocynth and rhubarb, in combination with quinine, will at once arrest the disease, which weeks of mere quinine-taking had failed even to control.

"In many forms of dyspensia the same holds good. The secretions of the stomach and bowels are disordered, the liver is gorged, and the tongue is covered with a vellow fur. The patient has been purged by means of senna, colocynth, or rhubarb: alkalies and alkaline earths, together with vegetable bitters, have been given; possibly the mineral acids have also been tried: moderately strict dieting has been had recourse to, and other expedients have been adopted; but in vain. The disagreeable taste in the mouth, the acidity, waterbrash, flatulence, drowsiness after meals, and restlessness at night, continue unabated. And what is the cause of this failure of treatment? Though the bowels act regularly, the motions are pale and lumpy, or else dark-colored and offensive; and the urine is scanty, high-colored, and loaded with lithates. Cases such as these often come before us in the wards, and occur still more frequently in private consulting practice. They convey a lesson which must not be forgotten. Even though healthy, dogs with artificially-made biliary fistulæ do not appear to secrete an increased quantity of bile under the influence of moderate doses of calomel. The lesson which they teach, and which you will do well to remember, is that so long as the secretory apparatus is inactive or out of order the remedies which are ordinarily most efficacious in relieving the symptoms of dyspepsia are of little avail, whereas they exert their beneficial influence directly that disorder is rectified and secretion is reëstablished. In cases such as these a few doses of calomel, combined with opium, if necessary, will in a few days effect a change for the better, which can not be brought about by other means in as many weeks. Under their influence the motions will lose their offensive odor, and assume a healthy color; the tongue will clean, the urine will become clear, the symptoms of acidity and discomfort will pass off, and your patient will give you credit for affording him relief. When this healthy condition of the secretions has been attained, you need have little anxiety as to your patient's recovery; for the remedies which had previously proved ineffective will speedily quiet the irritability of the stomach, increase its tone, and restore your patient to health.

"Let me take yet one more class of cases—the most common perhaps with which we have to do, and that in which. perhaps more than in any other, a want of proper regard to the secretions leads inevitably to unsuccessful practice. I refer to cases of so-called debility, in which stimulants, highfeeding, and tonics are constantly recommended, and are often fruitlessly had recourse to. The cases to which these observations apply are of every imaginable description. In private practice it often happens that a person not otherwise out of health is accidentally deprived of his usual exercise, and, his appetite being unimpaired, he takes more food than is absolutely required for the repair of his body. The wear and tear of his tissues being much less than usual owing to his inactivity, and the supply of fresh materials, owing to his unimpaired appetite, being in excess of the actual requirements of the body, one of two things must necessarily happen: either his excretory organs must do an unusual amount of work, and throw out of the system the whole of the matters which have been taken in excess of the actual requirements of the tissues, or the surplus materials must accumulate in the blood, alter its quality, and oppress the nervous system. The alternative is not doubtful. When the blood is surcharged with materials which, however good and nutritious, are yet in excess of the requirements of nutrition, the nervous centers are oppressed; and not only does languor, or general debility, as it is termed, occur, but the liver, kidneys, and other secretory organs become gorged and sluggish, the urine becomes scanty, and the motions become clay-colored, or else dark and offensive. In private practice cases such as these are constantly met with, in which, notwithstanding the unhealthy state of the secretions, tonics have been given for months, together with stimulants and every variety of strong food. and in which a few days of active purgation, some alterative doses of mercury, enforced exercise, and a restricted diet, by leading to the elimination of the surplus materials, and so to a purification of the blood, do more than all the previous tonics and rich feeding to put an end to the patient's languor. and restore his physical and mental power. In hospital practice these particular cases less frequently come before us: but in another form, and under other circumstances, similar instances not unfrequently present themselves. In the Roseberry ward at the present time is a stout, strong-looking, hysterical servant-girl-Sarah Fleetwood-suffering from amenorrhœa. She had undergone treatment for a considerable period before admission, and throughout had taken iron in various forms, but had not obtained relief. On admission she complained of extreme languor and debility, and of utter loss of appetite. Her tongue was clean, and her bowels were said to be regular; but her urine was scanty and loaded with lithates, and on examination her motions proved to be very scanty, and almost white, lumpy, and offensive, and had been so, according to her account, throughout her illness. She is a perfect type of the class of cases which I have been endeavoring to describe. She is oppressed by the presence in the blood of matters which ought long since to have been eliminated, but which the inactivity of her secretory organs has caused to be retained in the system; weak in the sense in which a healthy person on the eve of a bilious attack is weak, but in no other; weak from a cause which no strengthening food and no tonics will remove, nay, rather which they will tend to aggravate, and which protracted semi-starvation or the skilled aid of the physician is required to rectify. The iron and other tonics, the port-wine and other stimulants, which the poor girl had taken prior to her admission into the hospital, only tended still further to surcharge her system with materials which it was incapable of assimilating—to render her blood more noxious to the brain and other nervous centers, and thus to increase her languor and aggravate her suffering. Yet these very remedies have nearly effected her cure, now that healthy secretion has been reëstablished. Already, under the influence of a few doses of calomel and colocynth, the urine, instead of being scanty and loaded, has become abundant, and in every respect healthy: the motions are no longer pale and lumpy, but have become normal in character; color has returned to her lips; she sleeps more quietly, feels stronger and less languid, and no longer exhibits a repugnance to food. And now that the iron is able to do its work, its beneficial influence will soon be manifested still more decidedly, and the menstrual discharge will speedily return. In a precisely similar case, which I saw with Sir Charles Locock many years ago, the symptoms did not vield until after a protracted course of calomel; and experience justifies me in warning you that in several forms of amenorrhoea, and in many of the so-called cases of general debility, a deranged condition of the alvine secretions lies at the very root of the symptoms, and that all remedies will fail to relieve the patient until steps have been taken to rectify them. Purgation may or may not be necessary, and the aid of calomel may or may not be needed; but if either or both prove requisite to attain the desired object, they must be used without hesitation. No theoretical considerations must be permitted to countervail such clear and unmistakable indications for treatment. Experience confirms what theoretical considerations would lead us to expectnamely, that the true mode of restoring strength under the conditions we are now considering is not by administering food and tonics, which the patient is incapable of assimilating and making use of; nor is it by abstaining from administering alterative or aperient remedies, lest by so doing we should weaken the patient-both of which courses can only tend to continued malnutrition, and a gradually-increasing failure of strength—but rather to endeavor by appropriate means, and at whatever risk of present discomfort to the patient, to reestablish healthy secretion, and thus place him in a position to profit by wholesome food, the natural restorative of health and strength."

Paracentesis Thoracis in Pleuritic Effusion.— M. Constantin Paul has published, in the Bulletin de Thérap., eight cases, in which it is plainly evident that early tapping of the chest in undoubted pleuritic effusion is far more favorable than diaphoretics, derivatives, etc. The tapping is not used as a mere palliative, but in view of an eventual cure. M. Paul uses Raybard's instrument, which is fitted to a bag of goldbeater's skin, and has found that no air penetrates the chest.

OIL OF CADE IN ECZEMA.—Dr. Newcombe sends the following note to the Practitioner: "Having found the above preparation particularly efficacious as an outward application in many cases of eczema of the scalp, especially those which so closely resemble pityriasis, I was induced to try it in eczema of a dry character in other parts of the body, and did so with marked success. I have lately used it in a case of 'psoriasis diffusa,' extending from both knees down the front of the leg, and also appearing on the fore-arm, which had baffled the ordinary plan of treatment for a long time, and the improvement was so immediate that it could not be entirely due to the arsenic which the patient had been taking. I direct my patients to rub it well over all the spots every night with a camel's-hair brush."

Motes and Queries.

A Case of Opium-poisoning—Recovery.—A young man suffering with acute alcoholism got within half an hour two hypodermic injections of a combined solution of morphine and atropine, amounting altogether to one third grain of morphine and one twentieth grain of atropine, as estimated by Drs. Taylor and Orendorf, resident graduates at the Louisville Marine Hospital, who gave the injections. It is proper to state that the injections were given at the earnest entreaty of the patient, and that Dr. Taylor observed no effects from the first medication at the time he administered the second. Near five o'clock, two hours after the last dose was introduced into the system, the patient was found by Dr. Taylor upon his bed in a profound stupor, cold, bathed in perspiration, with short, infrequent breathing. A small quantity of aromatic spirits of ammonia was poured down the throat, and the same fluid was applied to the nostrils. Artificial respiration was begun, and I was summoned. I found the patient, soon after five o'clock, totally insensible; respiration stertorous, irregular, short, superficial, one to four to the minute, and ceasing almost entirely when the body was allowed to be quiet; pulse 160, soft and full; temperature 100; perspiration profuse; skin warm; pupils contracted to their minimum, and entirely insensible to light. Energetic flagellation, abundant cold douche, coffee by enema, and a hypodermic injection of one sixtieth of a grain of atropine, were employed without benefit. As soon as an electrical machine could be procured (Davis & Kidder's electro-galvanic instrument being the one used), the electric fluid was transmitted through the neck, chest, and abdomen.

For a brief period respiration was improved, and the pupils dilated largely. At the end of about fifteen minutes the breathing ceased, and artificial respiration, which had been carried on at short intervals from the first, was again resorted to. The pupils returned to their diminutive size. Breathing being in some measure restored, electricity was reapplied, with the same results as in the first instance. Alternating the electricity with the artificial respiration as often as the symptoms demanded, marked improvement occurred within an hour, and at the end of two hours the patient was able to reply to questions, and to walk feebly by the assistance of two men. When allowed to rest, he soon snored. Except when electrized, the pupils remained contracted. Large draughts of strong coffee were now given and vomiting set in. For forty-eight hours nausea and vomiting continued, together with vexatious itching. Within a few days health was perfectly restored.

The hypodermic syringe used was that ordinarily found in drug-stores, and probably not very accurate; and it is presumable, from the gravity of the symptoms produced, that more of the narcotic medicine was introduced than was supposed. There was no evidence of the antagonistic power of atropine in this case. I am impressed with the belief that neither electricity nor artificial respiration alone would have sufficed in this case, but that the combination of these two restoratives prevented a fatal result.

L. P. Y., JR.

THE LARGEST MEDICAL MONTHLY EDITORIAL STAFF IN AMERICA OR—ELSEWHERE.—Our friends, Drs. Powell and Goldsmith, of the Georgia Medical Companion, have recently associated with them in their journal sixty-three additional physicians, making a grand total of sixty-five editors. Georgia has been called the "Empire State of the South;" at this rate "the whole boundless continent"—of doctors will soon belong to her Medical Companion.

Periodical Hemorrhage from the Uterus of an Infant.—Dr. R. P. Ervin, of Prairie Bluff, Alabama, narrates a most remarkable case of a discharge of blood from the uterus of an infant, commencing when it was a month old, lasting from four to six days, recurring every twenty-eight days, and this strange phenomenon continuing until the infant was eighteen months of age; it then ceased, and has not reappeared. The child is now three years old, its parents are healthy, and it has always been perfectly well.

In the Cincinnati Journal of Medicine, August, 1866, we reported a case where menstruation commenced at three years and a half, recurring regularly until the child was four years and a half old, at which time we saw her.

Raciborski, in his work on Menstruation, Paris, 1868, has collected a number of cases of *infantile menstruation*, of some of which we will present brief abstracts.

Menstruation in a rachitic child, seventeen months old, commencing at one year (Dr. Susewind). Menstruation at nine months (Dr. De Lenhossek). Two cases precisely the same, one reported by Dieffenbach, the other by D'Outrepont. A child "regular" at two years, and pregnant at eight (Carns). An infant born, at New Orleans, her breasts perfectly developed, and the mons veneris covered with hair, first menstruating at three years (Dr. J. Le Beau). Menstruation at two years (Descuret). Menstruation at three months (Dr. Cornarmond). Raciborski justly observes, after concluding the list of cases, that in all these infants the breasts and external sexual organs were as developed as at puberty. And here is the distinction between infantile menstruations and ordinary hemorrhages: in the latter the blood comes from the womb and the vagina, perhaps even only from the vulva, and bears no relation to ovulation; on the contrary, in infantile menstruation there is an extraordinarily precocious development of the ovules and follicles. By an anomaly, such as is sometimes seen in other organic systems, these organs acquire in infants a development characteristic of adolescence or puberty. So too the external sexual organs and the breasts receive on their part this sympathetic influence, which marks maturity or the epoch of the first ovular menstruation.

We regret that Dr. Ervin does not mention the condition of the breasts and the external sexual organs in his case.

THE LOUISVILLE SCHOOL OF PHARMACY.—An institution bearing the above title has recently been inaugurated in this city under the most favorable auspices. Its faculty consists of Thomas E. Jenkins, M. D., professor of materia medica; M. Lewis Diehl, professor of pharmacy; and L. D. Kastenbine, M. D., professor of chemistry. The two former gentlemen are known to the profession as among the leading pharmaceutists of the United States. The latter. Dr. Kastenbine, is esteemed here not only as a most accomplished physician. but as an enthusiast in chemistry and microscopy. The organization is in every respect a good one. Students who may wish to become pharmaceutists need now go no further than Louisville. The college of pharmacy here will afford them every facility for prosecuting their work. We are glad to learn that the institution opened with between thirty and forty matriculates, which is said to be a larger class than assembled at the College of Pharmacy in Philadelphia at the end of ten years. This certainly speaks well for the reputation of the teachers in our new school. Prof. Jenkins delivered the inaugural address; and that the reader may have some idea of how much the world owes to apothecaries, we quote from it the following:

"Among the innumerable discoveries in chemistry made by apothecaries, I would mention the great class of substances called acids, zinc, antimony, phosphorus, arsenic, bismuth, ammonia, aluminium, the principal metallic salts, alcohol, ether, gunpowder, morphine, soda, chloroform, iodine, guncotton, nitro-glycerine, chloral (porcelain was invented by a Berlin apothecary named Botticher), the arts of photography, areometry, alkalimetry, chlorimetry, the manufacture of soda from salt, decolorizing and deodorizing by charcoal, the manufacture of sugar from beets, bleaching of fabrics by chlorine, the method of exhaustion called displacement, galvano-plasty, with the thousands of other processes and new bodies which have been developed since the true system of investigation of organic bodies was given to the world by the immortal Darmstadt apothecary, Liebig. You see, gentlemen, where the apothecary stands in relation to the world's progress, what respect he merits, and the place he is to occupy in the history of civilization."

A MEDICAL JOURNAL IN VERMONT.—We are promised early in the coming year a bimonthly journal, to be called the Vermont Medical Journal. It is to be under the editorial conduct of able and experienced writers, and published by J. M. Currier, M. D., at McIndies Falls, Vermont.

MEDICAL DEPARTMENT OF GEORGETOWN COLLEGE.—We copy the following from the National Medical Journal: "We take pleasure in announcing the fact that Dr. D. W. Bliss has voluntarily resigned the lectureship in the medical department of this college, thus relieving the institution from any embarrassment or unpleasant complications which might have grown out of his continued connection with it."

CHICAGO MEDICAL EXAMINER—NOTICE TO SUBSCRIBERS.—
The number of the Examiner for October was burned in the printing-office when nearly ready for delivery. The subscription-book and all business records are safe in our hands. The lost number will be supplied and the issues resumed as soon as arrangements can be made with a printer to do the work.

N. S. Davis & F. H. Davis, Editors and Proprietors. THE ARKANSAS STATE MEDICAL ASSOCIATION.—The second annual meeting of this Association was held at Little Rock, Ark., on Monday, November 5th. The attendance was large. Reports were read on malarial hematuria, influenza, cholera, and inflammation of the knee-joint, and gave rise to a spirited discussion. The first-named topic is one in which physicians in the South have seemed to feel a renewed interest for a few years back, and on which several excellent papers have already been written. The address of the president, Dr. P. O. Hooper, is a well-written and manly statement of the position and progress of the profession. Such utterances from one of the leading men of the state can but do good, not only in Arkansas, but everywhere they may be read.

The following officers were elected for the ensuing year: Dr. J. M. Holcombe, president; Drs. O. A. Hobson, J. F. Davies, and W. W. Bailey, vice-presidents; Drs. E. V. Deuell and Edward Cross, recording secretaries; Dr. Claib. Watkins, corresponding secretary; and Dr. J. R. Bond, treasurer.

The following standing committees were then appointed: Climatology—Drs. G. W. Lawrence, E. R. DuVal, and J. M. Holcombe; Medical Education—Drs. K. Starke, M. C. Boyce, and R. G. Jennings; Scientific Communications—Drs. W. H. Barry, E. V. Deuell, and G. H. Fort; Publication—Drs. Claib. Watkins, O. P. Greenwood, J. F. Davies, and O. A. Hobson; Medical Ethics—Drs. E. R. DuVal, J. M. Holcombe, and —Trezevant; Credentials—Drs. J. F. Davies, S. W. Jones, and Edward Cross.

The election of such officers and the appointment of such committees indicates a purpose on the part of the profession in Arkansas to place itself in the van of the army of progress in medicine. It means business. We hope to be able to present to our readers at an early day an abstract of some of the papers to which we have already alluded.

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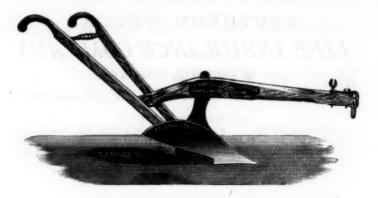
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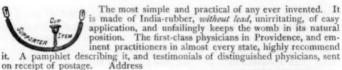
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NOTICE

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VIII. Reports of recent Improvements, Discoveries, and Important Observa-

tions in all branches of Medical Science will be furnished in each issue.

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Fig. 15. Pat. Mar. 24, 1868 and Mar. 16, 1869.

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On Diseases of the Throat and Chest, and Clinical Surgery, by Prof. E. R. PALMER, M. D.

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The room for Operative Surgery and the Application of Bandages, etc., is open early in September, and throughout the Session, under the supervision of the Professor of Surgery.

AUTUMN COURSE OF PRELIMINARY LECTURES FOR 1871.

This Course will commence on Monday, September 4th, and terminate on October 7th. The Lectures will be delivered as follows:

MICHOSCOPY, JAMES TYSON, M. D., Microscopist to the Philadelphia Hospital. REGIONAL ANATOMY, H. LENOX HOBE, M. D., Surgeon to the Children's Hospital. CLINICAL MEDICINE AND PHYSICAL DIAGNOSIS, WILLIAM PEPFER, M. D., Physician to the Philadelphia Hospital.
DISEASES OF THE SKIN, LOUIS A. DUHRING, M. D., Physician to the Dispensary for Skin

MORBID ANATOMY, JOSEPH G. RICHARDSON, M. D., Assistant Physician to the Episcopal Hospital.

CLINICAL LECTURERS.

WILLIAM PEPPER, M. D., Lecturer on Clinical Medicine and Physical Diagnosis. JAMES TYSON, M. D., Clinical Lecturer on Microscopy and Chemistry, applied to Diseases of the Urinary Organs.

or the Urinary Organs.
WILLIAM GOODELL, M. D., Clinical Lecturer on Diseases of Women and Children.
D. HAYES AGNEW, M. D., Professor of Surgery.
LOUIS A. DUHRING, M. D., Clinical Lecturer on Dermatology.
GEORGE STRAWBRIDGE, M. D., WILLIAM F. NORRIS, M. D., Clinical Lecturers on Diseases of the Eve and Ear,

JAMES GARRETSON, M. D., Clinical Lecturer on Surgical Diseases of the Mouth.

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HENRY HARTSHOIME, M. D., Professor of Hygiene.
JOHN J. REESE, M. D., Professor of Medical Jurisprudence, including Toxicology.

The Seventh Course of the Auxiliary Lectures will begin on the last Monday in March and terminate the last Thursday in June. These lectures are free to all students of the regular Medical Course.

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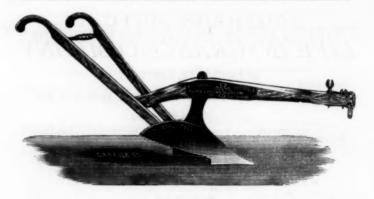
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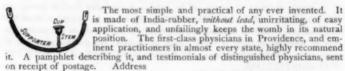
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The subscriber has purchased the entire interest of Capt. Silas F. Miller in the

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and pledges himself to his friends and the public that he will spare no pains to render it worthy of its time-honored name.

In its arrangements and appointments he is safe in saying that the Galt House is not surpassed by any hotel in the world.

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Manager.

HANBURY SMITH'S MINERAL SPRING WATERS

NOTICE.

NEW YORK, MARCH 2, 1870.

Having carefully examined the improved processes adopted in the laboratory of Dr. Hanbury Smith, and ANALYZED samples of the MINERAL SPRING WATERS which he offers for sale, I am prepared to testify that the Waters are manufactured with the most intelligent and conscientious care, and are every way reliable substitutes for the natural waters. The public estimation in which Dr. Smith's preparations are held is thus amply justified by my investigations and analyses.

CHARLES A. SEELY,

Late Prof. of Chemistry and Toxicology in the New York Medical College,
and of Chemistry and Metallurgy in the New York College of Dentistry.

The attention of the trade is invited to the following facts:
Dr. Smith's waters were the first ever placed in market on a large scale in the United

Their excellence created the demand for such goods, and made the business wholesale. They exactly represent the natural waters, producing identical medicinal effects. Their indisputable superiority has made them more popular than any other. They are more extensively prescribed in daily practice, and used by physicians themselves, than any other—a spontaneous and emphatic indorsement, certainly not surreptitiously obtained.

They are the only waters sold on draught by Hegeman & Co., Caswell, Hazard & Co., and the other leading druggists of New York and the neighboring cities.

In cases where other waters have been substituted the difference has been immediately detected by the public, and loss of custom has compelled a return to Dr. Smith's.

Materials for manufacture, in solution or as DRY SALTS; in both cases reduced to the smallest possible bulk.

Druggists visiting New York are cordially invited to visit the laboratory at 35 Union

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Our stock is large, and in variety and detail not surpassed by any house in the country, and which we are prepared to sell as low as any Western house. Orders respectfully solicited. All articles warranted as represented.

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Manufacturing Pharmaceutist

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Dr. L. A. BABCOCK'S SILVER UTERINE SUPPORTER

For the cure of Prolapsus, Retroversion, and Anteversion. Warranted a Radical Cure. Price, \$25. Price to Physicians, \$16.

BABE OCK'S PATENT.

Dr. L. A. Babcock's SILVER UTERINE SUP-PORTER, for the cure of Prolapsus, Retrover don and Anteversion. Warranted a radical care. Price. \$25.00.

would like to see the thing extensively used, for it supplies a want long felt.

QUINCY, ILL.

We would respectfully call the attention of the profession to Dr. L. A. BABCOCK's improvement in Uterine Supporters. These instruments derive their support from an external brace, and are destined to entirely supersede the old-fashioned, uncomfortable and useless pessary. They are easily adjusted, and so comfortable and advantageous to the wearer that patients who have long been confined to their beds or rooms with uterine difficulties express themselves as having "gotten into a new world" upon having a supporter applied. We speak thus positively of these instruments because we have thoroughly tested them.

DRS. CURTIS & MCMAHAN.

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DEAR SIR: Yours, with instructions, to hand. I speak as a lecturer on obstetrics and a physician of large experience in the treatment of uterine diseases, when I say that the more I become familiar with your invention the more valuable it appears to me; and I

EDWARD A. GILBERT, M. D.

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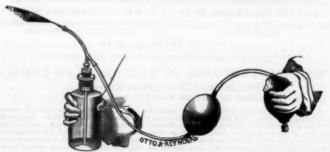
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THE LATEST IMPROVEMENTS And new inventions on hand and re-ceived constantly from our Agents in

Bellevue Hospital Medical College

CITY OF NEW YORK.

SESSIONS OF 1871-72

THE COLLEGIATE YEAR in this Institution embraces a Preliminary Autumnal Term.

regular Winter Session, and a Summer Session.

THE PRELIMINARY AUTUMNAL TERM for 1871-79 will commence on September 14. 1871, and continue until the opening of the Regular Session. During this term instruction, consisting of didactic lectures on special subjects and daily clinical lectures, will be given as consisting of undertal recurres on special students and stary clinical recurres, will be given as heretofore, exclusively by members of the Faculty. Students designing to attend the Regular Session are strongly recommended to attend during the Preliminary Term, but attendance during the latter is not required. During the Preliminary Term clinical and didactic lectures will be given in the same number and order as in the Regular Session.

REGULAR SESSION will commence on October 12th, and end about the 1st of

March, 1872.

FACULTY.

ISAAC E. TAYLOR, M. D.

Emeritus Prof. of Obstetrics and Diseases of Women and Children, and President of College.

JAMES R. WOOD, M. D., LL. D.

FORDYCE BARKER, M. D. Prof. of Clinical Midwifery and Dis. of Women.

Emeritus Prof. of Surgery. F. H. HAMILTON, M. D., LL. D.

Prof. of Practice of Surgery with Operations | Prof. of Obstetrics and Diseases of Women and and Clinical Surgery.

LEWIS A. SAYRE, M. D.

ALEX. B. MOTT, M. D.

Prof. of Surgical Anatomy with Operations and Clinical Surgery.

W. H. VAN BUREN, M. D.

Prof. of Prin. of Surgery with Diseases of the Genito-Urinary System and Clinical Surg.

BENJ. W. McCREADY, M. D.

GEO. T. ELLIOTT, M. D.

Children and Clinical Midwifery.

STEPHEN SMITH, M. D.

Prof. of Orthopedic Surgery and Clinical Surg. Prof. of Descriptive and Comparative Anatomy and Clinical Surgery.

AUSTIN FLINT, M. D.

Prof. of Principles and Practice of Medicine and Clinical Medicine.

R. OGDEN DOREMUS, M. D.

Professor of Chemistry and Toxicology.

WM. A. HAMMOND, M. D.

Prof. of Materia Medica and Therapeutics and Clinical Medicine.

Prof. of the Diseases of the Mind and Nervous System and Clinical Medicine.

AUSTIN FLINT, JR., M. D.

Professor of Physiology and Microscopy, and Secretary of the Faculty.

SPECIAL LECTURES IN THE REGULAR TERM.

OPHTHALMOLOGY-By Prof. HENRY D. NOYES, M. D. DISEASES OF THE SKIN-By Prof. FOSTER SWIFT, M. D.

A distinctive feature of the method of instruction in this College is the union of clinical and didactic teaching. All the lectures are given within the Hospital grounds, During the Regular Winter Session, in addition to four didactic lectures on every week-day, except Saturday, two or three hours are daily allotted to clinical instruction. The union of clinical and didactic teaching will also be carried out in the Summer Session, nearly all of teachers in this Faculty being physicians and surgeons in the Dellevue Hospital and the great Charity Hospital on Blackwell's Island.

This Session will consist of two Regitation Terms; the first from March 14th to July 1st. and the second from September 1st to the opening of the Regular Session. During this session there will be daily recitations in all the departments held by members of the regular Faculty

and their assistants. Regular clinics will also be held daily.

FEES FOR THE REGULAR SESSION.

Fees for Tickets to all the Lectures during the Preliminary and Regular Term, including			
Clinical Lectures	140	00	
Matriculation Fee	- 5	00	
Demonstrator's Ticket (including material for dissection)	10	00	
Graduation Fee	90	00	

FEES FOR THE SUMMER SESSION.

	5 00
Recitations and Clinics	5 00
Chemical Laboratory (including material) 22	5 00
101 - 11 - 11 - 11 - 11 - 11 - 11 - 11	00

Medical College. No. 20-2 m.

W. G. REDMAN President T. W. STARBIRD, Secretary. WM. INGRAM, Treasurer.

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All our Formulæ are published from time to time in the various Medical and Pharmaceutical journals for the benefit of the profession. WE HAVE NO PRIVATE FORMULÆ, and CLAIM NO PROPRIETARY RIGHTS IN ANY GOODS OF OUR PREPARATION.

The following testimonials, from gentlemen distinguished for their professional attainments, have been voluntarily tendered to the proprietors of the Louisville Chemical Works .

From H. A. Prout, M. D., President of the Academy of Sciences, St. Louis.

I have carefully examined the specimens of Chemical and Medical preparations manufactured by Prof. J. Lawrence Smith at the Louisville Chemical Works, and have no hesitation in saying that they are equal to the best articles to be found in commerce.

The most valuable in the following list have been submitted to analysis, and others to a critical inspection, and were found to be most beautifully and nearly prepared: Aqua Ammonia, Chloroform, Spirits Nitre, Hoffman's Anodyne, Sulphuric Ether, Spirits Ammonia Aromatic, Syrup of the Hypophosphites, Hypophosphite of Quinine, Phosphate Zinc, etc.

Some of these articles seem to have had the most careful attention devoted to their preparation, ranking them above most of the commercial articles bearing the same name. Among these special reference may be made to Sweet Spirits Nitre, Chloroform, Sulphuric Ether, Hoffman's Anodyne, Syrup Iodide Iron, Ammonia, and some other important preparations used in medicine. I have used some of these agents in my practice and find them worthy of all confidence. I am pleased to see the chemical arts so much advanced in the West as these preparations seem to indicate. The supervision of Prof. Smith alone would be a sufficient guaranty of their purity and excellence.

and excellence.

and excellence.

Two samples of your chloroform were tested by the usual tests, and we believe them to be chemically pure. They were compared with a specimen from the house of Tromsdorff, of Berlis, Prussia, and also one from the manufactory of Flockhart & Duncan, of Edinburgh. The tests, viz., Sulphuric Acid in equal quantity, Evaporation, Bichromate of Potash, Nitrate of Silver, and Soubevan's Test furnish precisely the same result, proving that there is really no difference in their purity. Analytic Chemist and Pres't Acad. Sciences, St. Louis.

From Charles A. Pope, M. D., St. Louis.

For several years I have had occasion to use a number of the preparations from the Louisville Chemical Works. It affords me pleasure to declare my conviction of their great excellence and furify. The high character of Prof. Smith as a gentleman and chemist is a sufficient guaranty to the public of their superior quality. By thus affording pure and reliable medicines both the profession and the public will be gainers, while it is hoped that the cheaper and adulterated articles will be, as they ought, thrust from the market. I gladly wish, them the extensive sale which their merit demands.

CHAS. A. POPE. M. D.

From John P. Hodgen, M. D., Professor of Anatomy and Physiology in Missouri Medical College, St. Louis.

I have used the Chloroform, Sweet Spirits Nitre, and Hoffman's Anodyne, from the Louisville Chemical Works, and take pleasure in stating that they have more fully come up to my desires than any articles of the kind ever used by myself.

JNO. P. HODGEN, M. D.

From E. S. Frazer, M. D., Professor of Obstetrics and the Diseases of Women and Children in Missouri Medical College, St. Louis.

Having used the medicines prepared at the Louisville Chemical Works extensively in my practice, I have no hesitation in recommending them as very superior—more fully meeting the indications described, and more satisfactory in their effects, than any preparations I have ever used.

E. S. FRAZER, M. D.

From B. J. Allen, M. D., St. Louis.

You desire my opinion of the therapeutical virtues of the preparations made by Prof. J. Lawrence Smith, of Louisville. It affords me pleasure to say that I have found the preparatious which I have used in my practice efficient and reliable, and believe them to be superior to any manufactured. B. J. ALLEN, M. D.

From Dr. T. S. Bell, of the University of Louisville.

our excellent preparations for medical purposes. From ample experience, I am able to say that I have found all your preparations fully equal to all the requirements of the U. S. Pharmacopcia. I could not be induced to use any other Chloroform for inhalation than yours, or that prepared by Dr. Squibb, of Brooklyn. I have found your Hoffman's Anodyne, Sweet Spirits of Nitre, various Fluid Extracts, and other important agents of the Materia Medica invaluable in bepractice of medicine. I am sure that physicians who may test the medicines they order for their patients will find yours pure in every particular. With earnest hope for your continued success, I am very truly yours,

T. S. BELL.

From Prof. Lewis Rogers, of the University of Louisville.

eneral public in certifying to the excellence of the various pharmaceutical preparations of your Chemical Works in this city. In purity, scientific accuracy, and in all other regards, your articles fully come up to the requirements of the U. S. Pharmacopeia. I have been greatly pleased with the non-officinal preparations which you have been so kind as to make for me occasionally.

Very truly,

LEWIS ROGERS, M. D.

FLUID AND SOLID EXTRACTS.

Prepared strictly according to the requirements of the U. S. Pharmacopaia, when Officinal; and, when non-officinal, according to the most approved formulæ, when each pint represents sixteen Troy ounces of the drug.

It is an unfortunate circumstance that so many manufacturers of Pharmaceutical Preparations ignore the national standard and furnish "improved" articles of an arbitrary and unknown strength, generally to reduce the cost. In regard to the so-called improvements, it is enough for us to know that they have been carefuly examined during the past year by those most compensation.

tent to decide (the revisors of the Pharmacopaia) and have not been adopted.

It would be well for physicians to add "L. C. W." in prescribing or ordering this class of medicines, to prevent the substitution of preparations meritorious perhaps, but of whose strength and method of preparation they can have no definite information.

While it is generally preferable to prepare Syrups, Tinctures, Wines, &c., from the crude material itself, it is frequently necessary to prepare these extemporaneously, for which reason each label embodies formulæ for preparing them from the Fluid Extracts.

CHLOROFORMUM PURIFICATUM, U. S. P.

A perfectly pure and reliable article of Chloroform was first offered to the public at these Works. The formula for its production was originated by our Dr. J. LAWRENCE SMITH, under whose direction it is still made. It is regarded throughout the South and West as a standard of purity, and yields a product which, while prompt in its action, is at the same time safe. (See analysis of Dr. H. A. Prent.) It not only is considered a standard of purity in the United States, but is used by the most distinguished oculists in Europe, who do not feel justified in using any other than "Smith" chloroform to produce the deep coma required for their delicate operations (Remarks of D. W. Yandell, Professor of Clinical Surgery, University of Louisville.)

SULPHURIC ETHER AND HOFFMAN'S ANODYNE.

But one grade of these articles is made here, and that the strictly officinal article. They are prepared with the greatest care and put up in sealed packages, which may be regarded as the guarantee of the Company that the contents are of the best character, and will stand any chemical test and any reasonable exposure to which they may be subjected.

COMPOUND SYRUP OF THE HYPOPHOSPHITES (Churchill's Remedy).

The reputation of this Syrup, as produced at these Works, is so well established that it is used almost to the entire exclusion of the syrup of other manufacturers. It is a handsome and pelatable article, prepared according to the process suggested by Dr. Churchill, of Paris, and communicated by him to Dr. Smith, who was the first to introduce its mannfacture into the United States. Each fluid drachm contains the hypophosphites of lime two and a half grains, soda one and a half grains, potash one grain, and iron three fourths of a grain.

COMPOUND SYRUP OF PHOSPHATES (Chemical Food).

Like the provious article this preparation was first manufactured in this country at these works Our process has always produced an article of uniform strength, which is palatible to the taste and remains clear and unchanged for years.

It is considered very useful in the treatment of softening of the bones, marasmus, nervous

debility, tuberculous and other analogous disease

Each fluid drachm contains one grain phosphate of iron, two and a half grains phosphate of time, with small amounts of other phosphates.

ELIXIR CALISAYA.

This preparation is already familiar to medical practitioners as an efficient and agreeable form for administering the bark. The tonic and anti-intermittent properties of the cinchona barks is well established, and they possess but one drawback in their extreme bitterness. This has been overcome to a great extent in the Elixir Calisaya, which, representing twelve grains of calisaya bark in the fluid ounce, is so combined with other ingredients as to make it an agreeable cordial, acceptable to the most delicate stomach.

To persons suffering from dyspepsia, indigestion, general debility from sickness or other causes etc., it will prove invaluable. It will be found one of the best and at the same time harmless preventives for fever and ague to persons exposed to its influences.

ELIXIR CALISAYA FERRATUM.

This valuable Tonic Elixir combines the remedial properties of five grains of Peruvian bark and two grains pyrophosphate of iron, in each tea-spoonful combined with aromatics. The elegant form in which these tonics are exhibited, freedom from the chalybeate taste of similar preparations

and its permanency will recommend it to physicians and consumers.

The working formula was published in Volume XL, of the American Journal of Pharmacy.

ELIXIR CALISAYA FERRATUM WITH STRYCHNIA

This valuable tonic and antiperiodic Elixir contains in each fluid drachm (tea-spoonful) the remedial properties of five grains cinchona calisaya, two grains pyrophosphate iron, and one one hundredth grain strychnia, with sufficient aromatics to free it from the chalybeate taste common in similar preparations, which, with its permanency, will recommend it to both physician and consumer. To persons suffering from nervous prostration, symptoms of paralysis, anæmia, arising from diseases peculiar to females, or general debility from any cause whatever, it will commed itself as a general therapeutic agent. It also forms one of the most effective remedies ever used to prevent

the recurrence of intermittent attacks when the chill is broken.

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ELIXIR CALISAYA FERRATUM WITH BISMUTH.

Each fluid drachm (tea-spoonful) o this valuable tonic contains the remedial properties of five

grains cinchona calisaya bark, two grains pyrophosphate iron, and two grains ammonia citrate bismuth, with aromatics sufficient to render it palatable to a delicate stomach.

It is valuable in cases of anæmia, chlorosis, and when a general tonic is required: and especially so when such cases are complicated with dyspepsia, irritable condition of the stomach and bowels. or chronic diarrhea.

ELIXIR CALISAYA FERRATUM WITH BISMUTH AND STRYCHNINE.

Each fluid drachm (tea-spoonful) of this valuable tonic and antiperiodic contains the remedial properties of five grains cinchona calisaya bark with two grains of pyrophosphate iron, two grains ammonia citrate bismuth and one one-hundredth grain strychnine with aromatics. To person suffering from nervous prostration, intermittent attacks, symptoms of paralysis, anæma, arising from diseases peculiar to females, or general debility, when complicated with dyspepsia, irritable condition of the stomach and bowels, diarrhea, &c, this Elixir will commend itself a valuable therapeutic agent. It is especially valuable as an antiperiodic to prevent the return intermittent attacks when once broken.

ELIXIR OF PEPSIN, BISMUTH, AND STRYCHNINE.

This agreeable preparation, although adapted to any form of dyspepaia, is especially valuable in cases where this disease is complicated with general debility. Each fluid drachm (tea-spoonful) contains five grains pepsine, one one-hundredth grain strych-

nine, one grain ammonia citrate bismuth, with aromatics

FERRATED WINE OF WILD-CHERRY.

Each dessert-spoonful of this valuable and agreeable sedative tonic contains the medicina properties of thirty grains of wild-cherry bark and eight grains citrate of iron.

It is especially valuable where the system requires the tonic effect of iron, with an arterial sedative.

PEPSIN

We are preparing Pepsin for our own use, and in a limited amount for the trade, after the formula of M. Boudault, using only the rennet of calves. Fifteen grains of the powder contain three grains of pure pepsin.

WINE OF PEPSIN.

Wine of Pepsin carefully prepared from fresh calves' rennets. Each fluid ounce contains five grains of pepsin in solution in pure old Sherry wine.

HYDRATE CHLORAL.

We are now manufacturing Hydrate of Chloral of undoubted purity in sufficient quantities to meet all demands on us. Our apparatus was designed by Dr. J. Lawrence Smith, under whose personal supervision it is made.

SPIRITUS ÆTHERIS NITRICI

Sweet Spirits of Nitre has fallen into disuse with many practitioners in consequence of its liability to decomposition. This is owing either to want of care in its manufacture, or, as is too often the case, from fraudulent additions of water to decrease its price. Water is injurious not only as a diluent, but is a most efficacious promoter of decomposition. We have samples of this article, manufactured by us more than two years ago, which have remained until now unchanged, although frequently exposed to light and air. This is due not only to the purity of the articles used in its manufacture, but also to the ingenious apparatus devised by Dr. Smith, which thoroughly frees the nitrous ether from every trace of ritrous acid. trace of nitrous acid.

Our Spts. Nit. Dulce contains five per cent. of pure ether.

SYRUP OF HYDRATE OF CHLORAL AND WILD-CHERRY.

Combining the sedative effect of wild cherry with the powerful hypnotic properties of hydrate of chloral. This has been used with great success by several of our leading physicians, at whose request we offer it to the profession.

Each dessert-spoonful contains the medicinal properties of thirty grains of wild cherry

and fifteen grains of hydrate of chloral in solution in glycerine and syrup.

SYRUP HYDRATE OF CHLORAL, HYOSCYAMUS AND VALERIAN.

This preparation has been used with much success in cases of insomnia caused by hysteric nervousness, mental depression, mania, female diseases, etc.

· Each dessert-spoonful (two drachms) contains the remedial properties of fifteen grains of chloral, five grains of hyoseyamus leaves, and twenty grains of valerian in solution in syrup and glycerine.

SYRUP PHOSPHATE IRON, QUININE, AND STRYCHNINE.

A powerful general tonic, stomachic, readily assimilable chalybeate, well adapted to certain chlorotic and anæmic states, used in morbid conditions of the nervous system, chronic diseases of the kidneys, many forms of cutaneous diseases where a tonic effect is desired, and in cases of strumous children threatened with scrofulous degeneration, and ultimately with localised tubercular development. One grain of phosphate iron, one grain phosphate quinia, and one thirty-second grain phosphate strychnia to the drachm of syrup

SYRUP IODIDE OF STARCH.

Recommended by Dr. Andrew Buchanan, of Glasgow, as a means of administering iodine in large doses without causing irritation of the stomach. It contains one fourth of one per cent. of iodine, or about one and a half grains to the ounce.

SYRUP IODIDE OF IRON AND MANGANESE.

Suited to the treatment of anæmia, resulting from obstinate intermittent fevers, and scrofulous, syphilitic, and cancerous affections. Fifty grains mixed iodides to the ounce.

WM. KENDRICK.

WATCHES, JEWELRY,

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TABLE CUTLERY MUSIC BOXES, AND MASONIC JEWELS.

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The Twenty-ninth Annual Course of Lectures will commence on Wednesday, Sept. 27th, 1871, and continue twenty weeks.

FACULTY.

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JOS, W. FREER, M.D., Prof. of Physiology and Microscopic Anatomy, College, Pres't. J. ADAMS ALLEN, M.D., LL.D., Prof. of Principles and Practice of Medicine, 503

Michigan Avenue.

E. INGALS, M.D., Prof. of Materia Medica and Medical Jurisprudence, 190 South Clark

DELASKIE MILLER, M.D., Prof. of Obstetrics and Diseases of Women and Children,

518 Wabash Avenue.
R. L. REA, M.D., Prof. of Anatomy, 119 Clark Street.
MOSES GUNN, A.M., M.D., Prof. of Principles and Practice of Surgery and Clinical

Surgery, College.
EDWIN POWELL, M.D., Prof. of Military Surgery and Surgical Anatomy, 45 Clark St.
JOSEPH P ROSS, M.D., Prof. of Clinical Medicine and Diseases of the Chest, 439 West

Washington Street, S. M.D., Prof. of Diseases of the Eye and Ear, 169 Dearborn St. HENRY M. LYMAN, M.D., Prof. of Chemistry and Pharmacy, 26 N. Ashland Ave.

CHARLES T. PARKES, M.D., Demonstrator, and Assistant to Professor of Surgery, FRANCIS L. WADSWORTH, M.D., Assistant to Professor of Physiology, E. FLETCHER INGALS, M.D., Assistant to Professor of Materia Medica C. T. FENN, M.D., Assistant to Professor of Obstetrics.

Janitor, at College.

FEES.-Lectures, \$55.00; Matriculation, \$5.00; Dissection, \$5.00; Hospital, \$5.00; Graduation, \$25.00.

For Annual Announcement, or any information with reference to the College, address the Secretary,

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518 Wabash Avenue, Chicago.

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ATOMIZATION OF LIQUIDS FOR INHALATION

LOCAL ANÆSTHESIA. &.c.

By the Atomizer any medicated liquid may be converted into the finest spray. In this state it may be inhaled into the smallest air-cells, thus opening a new era in the treatment of all diseases of the throat and lungs.

The Complete Steam Atomizer for Inhalation, &c.

(See Fig. 15.)

It consists of the spear-shaped brass boiler A, steam outlet-tube B, with packing-box C formed to receive rubber packing formed to receive rubber packing through which the atomizing tube D passes, steam-tight, and by means of which tubes of various sizes may be tightly held against any force of steam by screwing down its cover while the packing is warm; the safety-valve E, capable of graduation for high or low pressure by the spring or screw in its the boiler may be lifted while hot, the medicament-cup and cup-holder G, the support II, iron base I I, the glass face-shield J, with eval mouth-piece connected by the elastic band K with the cradle L, whose slotted staff passes into a slot in the shield-stand M M, where it may be fixed at any height or angle

Fig. 15. Pat. Mar. 24, 1868 and Mar. 16, 1869.

The waste-cup, medicament-cup and lamp are held in their places in such a manner that they can not fail out when the apparatus is carried or used over a bed or otherwise. All its joints are hard soldered. It can not be injured by exhaustion of water, or any attainable pressure of steam. It does not throw spirits of hot water to frighten or scale the patient. Is compact and portable; occupies space of one sixth cubic foot only; can be carried from place to place without removing the atomizing tubes or the water; can be unpacked and repacked without loss of time. Will render the best service for many years, and is cheap in the best sense of the word. PRICE. Neatly made, strong, black-walnut box, with convenient handle, additional, 2.50

Shurtleff's Atomizing Apparatus. (See Fig. 5.)



Patented March 24, 1868.

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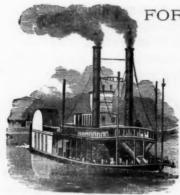
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Dissertations on these subjects must be transmitted, post-paid, to John Jeffries, M. D.,
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The following questions are proposed for 1873: 1. Electro-therapeutics. 2. The value
of Chemistry to the Medical Practitioner. The author of a dissertation, considered worthy
of a prize, on either of the subjects proposed for 1873, will be entitled to a premium of One Hundred and Fifty Dollars.

Dissertations on these subjects must be transmitted as above, on or before the first Wednesday in April, 1873.

Further information may be obtained from the Secretary, or from a more detailed advertisement in the "Boston Medical and Surgical Journal," of June 15, 1871.

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The retirement of C. C. Cox, M. D., LL. D., as editor, is followed by the advent of two gentlemen well known to the profession here, and we doubt not that they will keep the Journal solely as a high-toned medical work, worthy of a

place on the table of every physician in the land.

For the appearance of the Journal we have nothing to say, except that it shall be like the first volume, and be equal to or surpass any magazine in the country. TERMS-Three dollars a year, invariably in advance; single copies mailed to

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Session of 1871-72.

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TWEEFTE ANNOAL ANNOTHERMENT.

Session of 1871-72.

The Trustees and Faculty of the Miami Medical College herewith present the Annual Announcement for the Course of Lectures for the session of 1871-72. They embrace this opportunity to renew their acknowledgments for the large share of confidence which the profession has extended to the school—a confidence exhibited in a constant and rapid increase of matriculants, the past winter showing the largest class in attendance on the College.

They also desire to repeat that as in the past, it will still be the plan and purpose of the College to afford its students thorough and complete Medical Instruction.

THE COLLEGE BUILDING.

and all the property connected with it for purposes of medical teaching, is owned and controlled by the Faculty, free from debt; it is situated on Twelfth street, between Elm and Plum, nearly opposite the Cincinnati Hospital; it is easy of access, and in a pleasant, healthy part of the city.

THE LECTURE ROOMS, DISSECTING ROOMS, LABORATORY, ETC.,

Are all convenient, well lighted and ventilated, and ample in all respects for the accommodation and comfort of students. The convenience of location to the Hospital is such that students can readily pass from the College to the Hospital on shortest notice, not only for the regular clinics, but for witnessing obstetrical cases, and the results of injuries and operations in the Surgical department.

The Faculty remains unchanged, except we regret to announce the death of Prof. Foote; the duties of his chair, however, will be provided for. Its extended corps enables the school to give thorough instruction in all departments, by Professors enthusiastic in the teaching of medicine, all experienced, and several eminent throughout the country.

PRACTICAL ANATOMY.

The Dissecting rooms will be open early in October, under the direction and control of the Professor of Anatomy and the Demonstrator. The rooms are large, well arranged, and contain everything necessary for the

comfort and convenience of students. An abundant supply of MATERIEL will be furnished free of charge.

Coroner's cases are also sufficiently numerous to afford the students illustrations in Medical Jurisprudence and its allied topics.

THE MUSEUMS

are unusually complete. The rare collections embraced in the "Mussey Museum" and the "Shotwell Museum" afford the most extensive and interesting cabinets in the West. In addition to these, the means for demonstrative teaching in all departments are very rich and satisfactory: all of these, together with the private collections of the Professors, are receiving constant additions.

CLINICAL ADVANTAGES.

No city in the country now surpasses the advantages afforded to medical students for Clinical study. The Cincinnati Hospital, as now completed, is one of the largest and best structures of the kind in America. It is provided with an elegant, airy, and comfortable amphitheater, capable of seating over eight hundred persons. In this amphitheater all important Surgical operations are performed, in the presence of the class, and almost every disease is practically illustrated during the hours daily devoted to Clinical teaching. Several thousand patients, illustrating Clinical Medicine, Surgery, Ophthalmology, Midwifery, and Gynæcology are treated in this Hospital annually.

Clinical Lectures will be delivered of a practical and demonstrative character daily, from 11 to 1 o'clock. These will afford all the time and advantages for clinical study that can be appropriated consistently with Didactic studies. Indeed this department is believed to be as complete as in any college either East or West.

The Didactic lectures are so arranged as not to interfere with the Clinics at the Hospital.

College Dispensary. Prof. Williams has established his eye and ear Clinic at the College building. This will afford unusual advantages to all students desirious of giving special attention to the diseases of the Eye.

In addition to these remarkable advantages, there will be special Medical and Surgical Clinics held, and these will afford to the class peculiar advantages and opportunities for observation.

Six Resident Physicians are elected annually to the Cincinnati Hospital. These positions are open for competition. All second course students of this College who belong to the Clinical class may become candidates. All the present residents are of the last class of the Miami College.

INSTRUCTIONS IN ANALYTICAL CHEMISTRY.

Prof. Norton, after an absence of nearly two years in Europe, will resume his duties at the opening of the session. The Laboratory has been completely fitted up, and Prof. Norton has expended a large sum in new and approved apparatus while abroad. Should gentlemen of the class desire, there will be afforded a fine opportunity for the private study of practical and analytical Chemistry.

A Course of Spring and Summer Lectures and Demonstrations is made part of the regular plan of instruction in this College. This course commences about the 10th of March, and continues three months. It includes demonstrations and Lectures on Anatomy and demonstrations in Obstetrics and Surgical Operations on the cadaver, together with recitations, familiar lectures, etc., on important special and practical topics. It is regarded as supplementary to the winter course, and is optional; but regular matriculants of the College, either of the present or succeeding winters, will be admitted to its privileges without extra fee.

At the close of this course an opportunity will be given for examination, for the degree of M. D., to such as, being eligible at the close of the winter term, prefer for any reason to defer their final examinations.

PROGRESSIVE MEDICAL TEACHING.

It has long been believed by medical teachers, that some plan of progressive or graded teaching should be adopted, thereby relieving the student from the implied necessity for the system of cramming, so largely in vogue in American colleges. It has, therefore, been the custom of this school to advise students to devote their first session to the study of the elementary branches. We now make the following offer to students who purpose to attend three or more winters:

They may devote their time progressively to the elementary branches of anatomy, materia medica, physiology and chemistry, and at the end of the second term, they may be examined on these branches, and if found worthy, the Secretary will make a corresponding record in the books of the College; these examinations, if satisfactory, will be regarded as final. This arrangement will progressively relieve the student from the anxiety, mental strain, and excessive labor inseparable from a repetitional attendance on full courses of Lectures in all the departments, preparatory to a full and general final examination.

This plan will be optional, though deemed of great advantage to the maturity and thoroughness of medical education. The old plan will still be retained for the present, for those who prefer to pursue their studies in all the branches at once.

It will be observed that the price of tickets has been reduced from sixty to forty dollars; this step has been taken by the Faculty, after maturely considering the subject in all of its aspects. As the American Medical

Association at its last meetings has refused to interpose in regard to the subject of fees, leaving it to the colleges themselves to determine the matter, the assurance is now put forth, that, until something like a definite and uniform fee is established among the medical colleges of the West and South, the price of tickets in this institution will not be advanced beyond forty dollars, whatever it may see proper to do in the other direction here after.

SESSION OF 1871-72.

There will be Clinical Lectures at the Hospital from the 1st of October. The regular course at the College commences on the first Tuesday of October, 1871, and closes the 1st of March, 1872, making a course of five calendar months.

FEES.

Students are expected to arrange for payment of fees within the first two weeks of the term.

Matriculati	on fee (annually)	\$5	00
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Graduates of other schools who attend in this school, with the expectation of graduation, will pay \$20, and Matriculation fee, \$5.

Graduation fee	\$25	00
Demonstrators' ticket (materiel free of cost)	10	00
Hospital ticket	. 5	00
Alumni of this institution, free		

FOR GRADUATION.

The candidate must be twenty-one years of age, furnish evidence of study with some reputable practitioner for three years, and good moral character. His last course must be in this school. The presentation of a Thesis is not an absolute requirement, but is advised, and will be considered as evidence of acquirement. Four years of reputable practice will be accepted instead of a course of lectures.

EXPENSES OF LIVING, BOARD, ETC.

Good board may be had from \$4 to \$6 a week. Living expenses in Cincinnati are as moderate as in any large city, and of course vary with the habits and tastes of the individual.

Students, on arrival in the city, should at once call on the Janitor at the College, or on either of the Professors, who will aid them in procuring suitable boarding places.

The Atumni of this institution are requested to keep the Secretary advised of their post-office address, and it will be a favor if they furnish lists of the prominent physicians of their respective localities.

All Physicians desiring to receive the Annual Circular regularly will please forward their names and address.

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Spring and Summer Session of 1871.

The Spring and Summer Session of the above School of Medicine will commence March 13th, 1871, and continue until July 1st. The following Clinical and Didactic courses will be given:

On Venereal Diseases and Diseases of the Skin, and Clinical Medicine, by Prof. L. P. YANDELL, Jr., M. D.

On Diseases of the Eye, by Prof. J. M. BODINE, M. D.

On Diseases of the Throat and Chest, and Clinical Surgery, by Prof. E. R. PALMER, M. D.

On the Chemistry of the Fluids of the Body, and Clinical Medicine, by Prof. J. W. Holland, M. D.

On Anatomy and Diseases of Children, by F. C. Wilson, M. D.

On Practical Pharmacy, by C. J. RADEMAKER, M. D.

On Medical and Surgical Diseases of Women, by W. H. Bolling, M. D.

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D. W. YANDELL, M. DProfessor of Clinical Surgery.
THEOPHILUS PARVIN, M. D Prof. of the Medical and Surgical Diseases of Women.
R. O. COWLING, M. DDemonstrator of Anatomy.
FEES.

The Regular Session will commence on the first Monday in October, and continue until the 1st of March.

A Preliminary Course of Lectures, free to all Students, will commence on the second Monday in September, and continue till the opening of the Regular Term.

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106th SESSION.

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The Lectures of the Session of 1871-72 will commence on the Second Monday, 9th of October, and close on the last day of February ensuing.

MEDICAL FACULTY

GEORGE B. WOOD, M. D., Emeritus Professor of Theory and Practice of Medicine, SAMUEL JACKSON, M. D., Emeritus Professor of Institutes of Medicine, HUGH L. HODGE, M. D., Emeritus Prof. of Obstetrics and Diseases of Women and Children. HENRY H. SMITH. M. D., Emeritus Professor of Surgery.

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One Introductory will be delivered to the Course. Clinical instruction is given daily through-out the year, in the Medical Hall, by the Professors, and at the Hospitals. At the Philadelphia Hospital, containing nine hundred beds, instruction is free. The Dissecting-rooms, under the superintendence of the Professor of Anatomy and the emonstrator, are open from the first of September.

The room for Operative Surgery and the Application of Bandages, etc., is open early in September, and throughout the Session, under the supervision of the Professor of Surgery.

AUTUMN COURSE OF PRELIMINARY LECTURES FOR 1871.

This Course will commence on Monday, September 4th, and terminate on October 7th, The Lectures will be delivered as follows:

MICROSCOPY, JAMES TYSON, M. D., Microscopist to the Philadelphia Hospital.
REGIONAL ANATOMY, H. LENOX HODGE, M. D., Surgeon to the Children's Hospital.
CLINICAL MEDICINE AND PHYSICAL DIAGNOSIS, WILLIAM PEPPER, M. D., Physician to the Philadelphia Hospital.
DISEASES OF THE SKIN, LOUIS A. DUHRING, M. D., Physician to the Dispensary for Skin

MORBID ANATOMY, JOSEPH G. RICHARDSON, M. D., Assistant Physician to the Episcopal Hospital,

CLINICAL LECTURERS.

WILLIAM PEPPER, M. D., Lecturer on Clinical Medicine and Physical Diagnosis.

JAMES TYSON, M. D., Clinical Lecturer on Microscopy and Chemistry, applied to Diseases of the Urinary Organs.

or the Urinary Organs,
WILLIAM GOODELL, M. D., Clinical Lecturer on Diseases of Women and Children,
D. HAYES AGNEW, M. D., Professor of Surgery,
LOUIS A. DUHRING, M. D., Clinical Lecturer on Dermatology,
GEORGE STRAWBRIDGE, M. D., WILLIAM F. NORRIS, M. D., Clinical Lecturers on Diseases of the Eve and Ear.

JAMES GARRETSON, M. D., Clinical Lecturer on Surgical Diseases of the Mouth.

EXPENSES.—Fees for the Course of Lectures, \$140. Matriculating Fee (paid once only), \$5.00. Graduating Fee, \$30.00.

AUXILIARY FACULTY OF MEDICINE.

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HARMSON ALLESS, M. D., Professor of Botany,
FERDINAND V. HAYDEN, M. D., Professor of Botany,
HENRY HARTSHORNE, M. D., Professor of Mineralogy and Geology,
HENRY HARTSHORNE, M. D., Professor of Medical Jurisprudence, including Toxicology,
JOHN J. REESE, M. D., Professor of Medical Jurisprudence, including Toxicology,

The Seventh Course of the Auxiliary Lectures will begin on the last Monday in March and terminate the last Thursday in June. These lectures are free to all students of the regular Medical Course.

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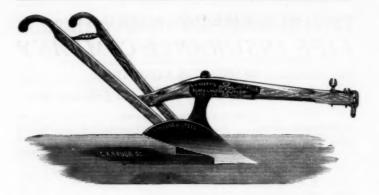
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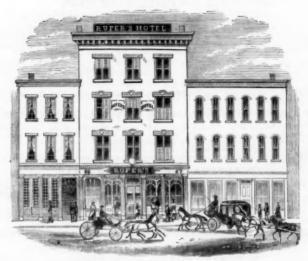
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The Ratio of Assets to Liabilities is greater than that of any other Company in the country.

The Phænix is the only Company in the country which offers ALL the advantages of an all-cash or half-note Company.

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GALT HOUSE,

LOUISVILLE, KY.



The subscriber has purchased the entire interest of Capt. Silas F. Miller in the

GALT HOUSE.

and pledges himself to his friends and the public that he will spare no pains to render it worthy of its time-honored name.

In its arrangements and appointments he is safe in saying that the Galt House is not surpassed by any hotel in the world.

JILSON P. JOHNSON,

Manager.

HANBURY SMITH'S MINERAL SPRING WATERS

NOTICE.

NEW YORK, MARCH 2, 1870.

Having carefully examined the improved processes adopted in the laboratory of Dr. Hanbury Smith, and ANALYZED samples of the MINERAL SPRING WATERS which he offers for sale, I am prepared to testify that the Waters are manufactured with the most intelligent and conscientious care, and are every way reliable substitutes for the natural waters. The public estimation in which Dr. Smith's preparations are held is thus amply justified by my investigations and analyses.

CHARLES A. SEELY,

Late Prof. of Chemistry and Toxicology in the New York Medical College,
and of Chemistry and Metallurgy in the New York College of Dentistry.

The attention of the trade is invited to the following facts:

Dr. Smith's waters were the first ever placed in market on a large scale in the United

Their excellence created the demand for such goods, and made the business wholesale. They exactly represent the natural waters, producing identical medicinal effects. Their indisputable superiority has made them more popular than any other. They are more extensively prescribed in daily practice, and used by physicians themselves, than any other—a spontaneous and emphatic indorsement, certainly not surreptitionsly obtained.

tionsily obtained.

They are the only waters sold on draught by Hegeman & Co., Caswell, Hazard & Co., and the other leading druggists of New York and the neighboring cities.

In cases where other waters have been substituted the difference has been immediately detected by the public, and loss of custom has compelled a return to Dr. Smith's.

Materials for manufacture, in solution or as dry salts; in both cases reduced to the smallest possible bulk.

Druggists visiting New York are cordially invited to visit the laboratory at 35 Union

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Our stock is large, and in variety and detail not surpassed by any house in the country, and which we are prepared to sell as low as any Western house. Orders respectfully solicited. All articles warranted as represented.

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Dr. L. A. BABCOCK'S SILVER UTERINE SUPPORTER

For the cure of Prolapsus, Retroversion, and Anteversion. Warranted a Radical Cure. Price, \$25. Price to Physicians, \$16.

We would respectfully call the attention of the profession to Dr. L. A. BABCOCK'S improvement in Uterine Supporters. These instruments derive their support from an external brace, and are destined to entirely supersede the old-fashioned, uncomfortable and useless pessary. They are easily adjusted, and so comfortable and advantageous to the wearer that patients who have long been confined to their beds or rooms with uterine difficulties express themselves as having "gotten into a new world" upon having a sup-porter applied. We speak thus posi-tively of these instruments because we

Dr. L. A. Babcock's SILVER UTERINE SUP-PORTER, for the cure of Prolapsus, Retroversion and Anteversion. Warranted a radical care. Price, \$25.00.

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DEAR SIR: Yours, with instructions, to hand. I speak as a lecturer on obstetrics and a physician of large experience in the treatment of uterine diseases, when I say that the more I become familiar with your invention the more valuable it appears to me; and I would like to see the thing extensively used, for it supplies a want long felt.

have thoroughly tested them.

EDWARD A. GILBERT, M. D.

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Manufacturers and Importers of
SURGICAL and ORTHOPEDICAL INSTRUMENTS.



Every apparatus for Local Anæsthesia and for Atomization of Liquids, Laryngoscopes, Syringes, Splints for Hip-Joint Disease, Skeletons, Trusses, Elastic Stockings, Laminaria Digitata, Uterine Tents, Axilla Thermometers, Beigel's Inhaler and Powder, etc.

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Bellevue Hospital Medical College

CITY OF NEW YORK.

SESSIONS OF 1871-72

THE COLLEGIATE YEAR in this Institution embraces a Preliminary Autumnal Term, the regular Winter Session, and a Summer Session.

**RHE PRELIMINARY AUTUMNAL TERM for 1871-72 will commence on September 14, 1871, and continue until the opening of the Regular Session. During this term instruction, consisting of didactic lectures on special subjects and daily clinical lectures, will be given as heretofore, exclusively by members of the Faculty. Students designing to attend the Regular Session are strongly recommended to attend during the Preliminary Term, but attendance during the latter is not required. During the Preliminary Term clinical and didactic lectures will be given in the same number and order as in the Regular Session.

THE REGULAR SESSION will commence on October 12th, and end about the 1st of

March, 1872.

FACILLTY

ISAAC E. TAYLOR, M. D.

Emeritus Prof. of Obstetrics and Diseases of Women and Children, and President of College.

JAMES R. WOOD, M. D., LL. D. Emeritus Prof. of Surgery.

FORDYCE BARKER, M. D. Prof. of Clinical Midwifery and Dis, of Women.

F. H. HAMILTON, M. D., LL. D.

and Clinical Surgery.

LEWIS A. SAYRE, M. D.

Prof. of Orthopedic Surgery and Clinical Surg.

ALEX, B. MOTT, M. D.

Prof. of Surgical Anatomy with Operations and Clinical Surgery.

W. H. VAN BUREN, M. D.

Prof. of Prin, of Surgery with Diseases of the Genito-Urinary System and Clinical Surg.

BENJ. W. McCREADY, M. D.

GEO, T. ELLIOTT, M. D.

Prof. of Practice of Surgery with Operations | Prof. of Obstetrics and Diseases of Women and Children and Clinical Midwifery,

STEPHEN SMITH, M. D.

Prof, of Descriptive and Comparative Anatomy and Clinical Surgery.

AUSTIN FLINT, M. D.

Prof. of Principles and Practice of Medicine and Clinical Medicine.

R. OGDEN DOREMUS. M. D.

Professor of Chemistry and Toxicology,

WM. A. HAMMOND, M. D.

Prof. of Materia Medica and Therapeutics and Clinical Medicine,

Prof. of the Diseases of the Mind and Nervous System and Clinical Medicine,

AUSTIN FLINT, JR., M. D.

Professor of Physiology and Microscopy, and Secretary of the Faculty.

SPECIAL LECTURES IN THE REGULAR TERM.

OPHTHALMOLOGY-By Prof. HENRY D. NOYES, M. D. DISEASES OF THE SKIN-By Prof. FOSTER SWIFT, M. D.

A distinctive feature of the method of instruction in this College is the union of clinical and didactic teaching. All the lectures are given within the Hospital grounds. During the Regular Winter Session, in addition to four didactic lectures on every week-day, except Saturday, two or three hours are daily allotted to clinical instruction. The union of clinical and didactic teaching will also be carried out in the Summer Session, nearly all of the teachers in this Faculty being physicians and surgeons in the Bellevue Hospital and the great Charity Hospital on Blackwell's Island.

This Session will consist of two Recitation Terms: the first from March 14th to July 1st, and the second from September 1st to the opening of the Regular Session. During this session there will be daily recitations in all the departments held by members of the regular Faculty and their assistants. Regular clinics will also be held daily.

FEES FOR THE REGULAR SESSION.

The state of the s			
Fees for Tickets to all the Lectures during the Preliminary and Regular Term, including			
	140	00	
Matriculation Fee	5	00	
Demonstrator's Ticket (including material for dissection)	10	00	
Graduation Fee	30	00	

FEES FOR THE SUMMER SESSION.

Matriculation (ticket good for the following Winter)	00
Recitations and Clinics	00
Chemical Laboratory (including material) 25	00
Dissecting (tickets good for the following Winter)	00

For the annual circular and catalogue, giving regulations for graduation and other information, address the Secretary of the College, Prof. AUSTIN FLINT, JR., Bellevue Hospital Medical College. No. 20-2 m.

W. G. REDMAN, President. T. W. STARBIRD, Secretary. WM. INGRAM. Treasurer.

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I. LAWRENCE SMITH, M. D. I. P. BARNUM, M. D.

Louisville Chemical Works

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OFFER TO THE TRADE, OF OUR OWN MANUFACTURE, ALL THE & CHEMICALS USED IN THE ARTS:

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The following testimonials, from gentlemen distinguished for their professional attainments, have been voluntarily tendered to the proprietors of the Louisville Chemical Works:

From H. A. Prout, M. D., President of the Academy of Sciences, St. Louis.

I have carefully examined the specimens of Chemical and Medical preparations manufactured by Prof. J. Lawrence Smith at the Louisville Chemical Works, and have no hesitation in saying that they are equal to the best articles to be found in commerce.

that they are equal to the best articles to be found in commerce.

The most valuable in the following list have been submitted to analysis, and others to a critical inspection, and were found to be most beautifully and neatly prepared: Aqua Ammonia, Chloroform, Spirits Nitre, Hoffman's Anodyne, Sulphuric Ether, Spirits Ammonia Aromatic, Syrup of the Hypophosphites, Hypophosphite of Quinine, Phosphate Zinc, etc.

Some of these articles seem to have had the most careful attention devoted to their preparation, ranking them above most of the commercial articles bearing the same name. Among these, special reference may be made to Sweet Spirits Nitre, Chloroform, Sulphuric Ether, Hoffman'e Anodyne, Syrup Iodide Iron, Ammonia, and some other important preparations used in medicine. I have used some of these agents in my practice and find them worthy of all confidence.

I am pleased to see the chemical arts so much advanced in the West as these preparations seem to indicate. The supervision of Prof. Smith alone would be a sufficient guawanty of their purity and excellence.

and excellence.

Two samples of your chloroform were tested by the usual tests, and we believe them to be chemically pure. They were compared with a specimen from the house of Tromsdorff, of Berlin, Prussia, and also one from the manufactory of Flockhart & Duncan, of Edinburgh. The tests, viz., Sulphuric Acid in equal quantity, Evaporation, Bichromate of Potash, Nitrate of Silver, and Soubevan's Test furnish precisely the same result, proving that there is really no difference in their purity.

H. A. PROUT, M. D. Analytic Chemist and Pres't Acad. Sciences, St. Louis.

From Charles A. Pope, M. D., St. Louis.

For several years I have had occasion to use a number of the preparations from the Louisville Chemical Works. It affords me pleasure to declare my conviction of their great excellence and purity. The high character of Prof. Smith as a gentleman and chemist is a sufficient guaranty to the public of their superior quality. By thus affording pure and reliable medicines both the profession and the public will be gainers, while it is hoped that the cheaper and adulterated articles will be, as they ought, thrust from the market. I gladly wish them the extensive sale which their merit demands.

CHAS. A. POPE, M. D.

From John P. Hodgen, M. D., Professor of Anatomy and Physiology in Missouri Medical College, St. Louis.

I have used the Chloroform, Sweet Spirits Nitre, and Hoffman's Anodyne, from the Louisville Chemical Works, and take pleasure in stating that they have more fully come up to my desires han any articles of the kind ever used by myself.

JNO. P. HODGEN, M. D.

From E. S. Frazer, M. D., Professor of Obstetrics and the Diseases of Women and Children in Missouri Medical College, St. Louis.

Having used the medicines prepared at the Louisville Chemical Works extensively in my practice, I have no hesitation in recommending them as very superior—more fully meeting the indications described, and more satisfactory in their effects, than any preparations I have ever used.

E. S. FRAZER, M. D.

From B. J. Allen, M. D., St. Louis.

You desire my opinion of the therapeutical virtues of the preparations made by Prof. J. Lawrence Smith, of Louisville. It affords me pleasure to say that I have found the preparations which I have used in my practice efficient and reliable, and believe them to be superior to any manufactured. B. J. ALLEN, M. D.

From Dr. T. S. Bell, of the University of Louisville.

"I take pleasure in discharging gratefully a duty I owe to have found all your preparations fully equal to all the requirements of the U. S. Pharmacopoea. I am able to say that I have found all your preparations fully equal to all the requirements of the U. S. Pharmacopoea. I outle not be induced to use any other Chloroform for inhalation than yours, or that prepared by Dr. Squibb, of Brooklyn. I have found your Hoffman's Anodyne, Sweet Spirits of Nitre, various Fluid Extracts, and other important agents of the Materia Medica invaluable in the practice of medicine. I am sure that physicians who may test the medicines they order for their patients will find yours pure in every particular. With earnest hope for your continued success, I am very truly yours. I am very truly yours. T. S. BELL.

From Prof. Lewis Rogers, of the University of Louisville.

* I feel that I am doing a favor to the profession and general public in certifying to the excellence of the various pharmaceutical preparations of your Chemical Works in this city. In purity, scientific accuracy, and in all other regards, your articles fully come up to the requirements of the U. S. Pharmacopoia. I have been greatly pleased with the non-officinal preparations which you have been so kind as to make for me occasionally.

Very truly,

LEWIS ROGERS, M. D.

FLUID AND SOLID EXTRACTS.

Prepared strictly according to the requirements of the U. S. Pharmacopæia, when Officinal; and, when non-officinal, according to the most approved formulæ, when each pint represents sixteen Troy ounges of the drug.

It is an unfortunate circumstance that so many manufacturers of Pharmaceutical Preparations ignore the national standard and furnish "improved" articles of an arbitrary and unknown strength, generally to reduce the cost. In regard to the so-called improvements, it is enough for as to know that they have been carefuly examined during the past year by those most competent to decide (the revisors of the Pharmacopaia) and have not been adopted.

It would be well for physicians to add "L. C. W." in prescribing or ordering this class of medicines, to prevent the substitution of preparations meritorious perhaps, but of whose strength

and method of preparation they can have no definite information.

While it is generally preferable to prepare Syrups, Tinctures, Wines, &c., from the crude material itself, it is frequently necessary to prepare these extemporaneously, for which reason each label embodies formulæ for preparing them from the Fluid Extracts.

CHLOROFORMUM PURIFICATUM, U. S. P.

A perfectly pure and reliable article of Chloroform was first offered to the public at these Works. The formula for its production was originated by our Dr. J. LAWRENCE SANTH, under whose direction it is still made. It is regarded throughout the South and West as a standard of purity, and yields a product which, while prompt in its action, is at the same time safe. (See analysis of Dr. H. A. Prout.) It not only is considered a standard of purity in the United State, but is used by the most distinguished oculists in Europe, who do not feel justified in using any other than "Smith" chloroform to produce the deep coma required for their delicate operations. (Remarks of D. W. Yandell, Professor of Clinical Surgery, University of Losizville.)

SULPHURIC ETHER AND HOFFMAN'S ANODYNE.

But one grade of these articles is made here, and that the sucicly officinal article. They are prepared with the greatest care and put up in seaded packages, which may be regarded as the guarantee of the Company that the contents are of the best character, and will stand any chemical test and any reasonable exposure to which they may be subjected.

COMPOUND SYRUP OF THE HYPOPHOSPHITES (Churchill's Remedy).

The reputation of this Syrup, as produced at these Works, is so well established that it is used almost to the entire exclusion of the syrup of other manufacturers. It is a handsome and palatable article, prepared according to the process suggested by Dr. Churchill, of Paris, and communicated by him to Dr. Smith, who was the first to introduce its manufacture into the United States. Each fluid drachm contains the hypophosphites of lime two and a half grains, soda one and a half grains, potash one grain, and iron three fourths of a grain.

COMPOUND SYRUP OF PHOSPHATES (Chemical Food).

Like the pravious article this preparation was first manufactured in this country at these works Our process has always produded an article of uniform strength, which is palatable to the taste

one process has a ways produced an article of uniform strength, which is paradable to the base and remains clear and unchanged for years.

It is considered very useful in the treatment of softening of the bones, marasmus, nervous debility, tuberculous and other analogous diseases.

Each fluid drachm contains one grain phosphate of iron, two and a half grains phosphate of hime, with small amounts of other phosphates.

ELIXIR CALISAVA.

This preparation is already familiar to medical practitioners as an efficient and agreeable form for administering the bark. The tonic and anti-intermittent properties of the cinchona barks is well established, and they possess but one drawback in their extreme bitterness. This has been overcome to a great extent in the Elixir Calisaya, which, representing twelve grains of calisaya bark in the fluid ounce, is so combined with other ingredients as to make it an agreeable cordial, acceptable to the most delicate stomach.

To persons suffering from dyspepsia, indigestion, general debility from sickness or other causes etc., it will prove invaluable. It will be found one of the best and at the same time harmless preventives for fever and ague to persons exposed to its influences.

ELIXIR CALISAYA FERRATUM.

This valuable Tonic Elixir combines the remedial properties of five grains of Peruvian bark and two grains pyrophosphate of iron, in each tea-spoonful combined with aromatics. The elegant form in which these tonics are exhibited, freedom from the chalybeate taste of similar preparations and its permanency will recommend it to physicians and consumers.

The working formula was published in Volume XL of the American Journal of Pharmacy.

ELIXIR CALISAYA FERRATUM WITH STRYCHNIA.

This valuable tonic and antiperiodic Elixir contains in each fluid drachm (tea-spoonful) the remedial properties of five grains cinchona calisaya, two grains pyrophosphate iron, and one one hundredth grain strychnia, with sufficient aromatics to free it from the chalybeate taste common in similar preparations, which, with its permanency, will recommend it to both physician and consumer.

similar preparations, which, with its permanency, win recomment it to both physician and consumer. To persons suffering from nervous prostration, symptoms of paralysis, anæmi, arising from diseases peculiar to females, or general debility from any cause whatever, it will commend itself as general therapeutic agent. It also forms one of the most effective remedies ever used to prevent the recurrence of intermittent attacks when the chill is broken.

ELIXIR CALISAYA FERRATUM WITH BISMUTH.

Each fluid drachm (tea-spoonful) o this valuable tonic contains the remedial properties of five

grains cinchona calisaya sportini) of this valuable tone contains the remental properties of twe grains properties of twe grains properties of twe grains ammonia citrate sismuth, with aromatics sufficient to render it palatable to a delicate stomach.

It is valuable in cases of anæmia, chlorosis, and when a general tonic is required; and especially so when such cases are complicated with dyspepsia, irritable condition of the stomach and bowels, chronic diarrhea.

ELIXIR CALISAYA FERRATUM WITH BISMUTH AND STRYCHNINE.

Each fluid drachm (tea-spoonful) of this valuable tonic and antiperiodic contains the remedial properties of five grains cinchona calisaya bark with two grains of pyrophosphate iron, two grains ammonia citrate bismuth and one one-hundredth grain strychnine with aromatics.

To persons suffering from nervous prostration, intermittent attacks, symptoms of paralysis, anæma, arising from diseases peculiar to females, or general debility, when complicated with dyspessia, irritable condition of the stomach and bowels, diarrhea, &c., this Elixir will commend itself a valuable therapeutic agent. It is especially valuable as an antiperiodic to prevent the return intermittent attacks whe once broken.

ELIXIR OF PEPSIN, BISMUTH, AND STRYCHNINE,

This agreeable preparation, although adapted to any form of dyspepsia, is especially valuable in cases where this disease is complicated with general debility.

Each fluid drachm (tea-spoonful) contains five grains pepsine, one one-hundredth grain stryck-

nine, one grain ammonia citrate bismuth, with aromatics.

FERRATED WINE OF WILD-CHERRY.

Each desert-spoonful of this valuable and agreeable sedative tonic contains the medicina properties of thirty grains of wild-cherry bark and eight grains citrate of iron. It is especially valuable where the system requires the tonic effect of iron, with an arterial sedative.

PEPSIN.

We are preparing Pepsin for our own use, and in a limited amount for the trade, after the formula of M. Boudault, using only the rennet of calves. Fifteen grains of the powder contain three grains of pure pepsin.

WINE OF PEPSIN

Wine of Pepsin carefully prepared from fresh calves' rennets. Each fluid ounce contains five grains of pensin in solution in pure old Sherry wine.

HVDRATE CHLORAL

We are now manufacturing Hydrate of Chloral of undoubted purity in sufficient quantities to meet all demands on us. Our apparatus was designed by Dr. J. Lawrence Smith, under whose personal supervision it is made.

SPIRITUS ÆTHERIS NITRICI.

Sweet Spirits of Nitre has fallen into disuse with many practitioners in consequence of its liability to decomposition. This is owing either to want of care in its manufacture, or, as is too often the case, from fraudulent additions of water to decrease its price. Water is injurious not only as a diluent, but is a most efficacious promoter of decomposition.

We have samples of this article, manufactured by us more than two years ago, which have remained until now unchanged, although frequently exposed to light and air. This is due not only to the purity of the articles used in its manufacture, but also to the ingenious apparatus devised by Dr. Smith, which thoroughly frees the nitrous ether from every trace of nitrous acid.

Our Spts. Nit. Dulce contains five per cent. of pure ether.

SYRUP OF HYDRATE OF CHLORAL AND WILD-CHERRY.

Combining the sedative effect of wild cherry with the powerful hypnotic properties of hydrate of chloral. This has been used with great success by several of our leading physicians, at whose request we offer it to the profession.

Each dessert-spoonful contains the medicinal properties of thirty grains of wild cherry and fifteen grains of hydrate of chloral in solution in glycerine and syrup.

SYRUP HYDRATE OF CHLORAL, HYOSCYAMUS AND VALERIAN.

This preparation has been used with much success in cases of insomnia caused by hysteric nervousness, mental depression, mania, female diseases, etc.

Each dessert-spoonful (two drachms) contains the remedial properties of fifteen grains of chloral, five grains of hyoseyamus leaves, and twenty grains of valerian in solution in syrup and glycerine.

SYRUP PHOSPHATE IRON, QUININE, AND STRYCHNINE.

A powerful general tonic, stomachic, readily assimilable chalybeate, well adapted to certain chlorotic and anomic states, used in morbid conditions of the nervous system. certain chiefone and manine states, used in motival conditions of the nervous system, chronic diseases of the kidneys, many forms of cutaneous diseases where a tonic effect is desired, and in cases of strumous children threatened with scrofulous degeneration, and ultimately with localized tubercular development. One grain of phosphate iron, one grain phosphate quinna, and one thirty-second grain phosphate strychnia to the drachm of syrup

SYRUP IODIDE OF STARCH.

Recommended by Dr. Andrew Buchanan, of Glasgow, as a means of administering iodine in lurge doses without causing irritation of the stomach. It contains one fourth of one per cent, of iodine, or about one and a half grains to the ounce.

SYRUP IODIDE OF IRON AND MANGANESE.

Suited to the treatment of anæmia, resulting from obstinate intermittent fevers, and scrofulous, syphilitic, and cancerous affections. Fifty grains mixed iodides to the ounce.

WM. KENDRICK.

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TABLE CUTLERY MUSIC BOXES, AND MASONIC JEWELS.

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Special attention to Orders C.O.D., with privilege.

RUSH MEDICAL COLLEGE. CHICAGO.

The Twenty-ninth Annual Course of Lectures will commence on Wednesday, Sept. 27th, 1871, and continue twenty weeks.

FACULTY.

- I. V. Z. BLANEY, A.M., M.D., Emeritus Prof. of Chemistry and Pharmacy.
- JOS. W. FREER, M.D., Prof. of Physiology and Microscopic Anatomy, College, Pres't. J. ADAMS ALLEN, M.D., LL.D., Prof. of Principles and Practice of Medicine, 503
- Michigan Avenue E. INGALS, M.D., Prof. of Materia Medica and Medical Jurisprudence, 100 South Clark
- DELASKIE MILLER, M.D., Prof. of Obstetrics and Diseases of Women and Children,
- DELASKIE MILLER, M.D., Frot. of Obstetries and Diseases of Women and Children, 518 Wahash Avenue.

 R. L. REA, M.D., Prof. of Anatomy, 119 Clark Street.
 MOSES GUNN, A.M., M.D., Prof. of Principles and Practice of Surgery and Clinical Surgery, College.

 EDWIN POWELL, M.D., Prof. of Military Surgery and Surgical Anatomy, 45 Clark St.
 JOSEPH P ROSS, M.D., Prof. of Clinical Medicine and Diseases of the Chest, 429 West
- Washington Street,
 EDWARD L. HOLMES, M.D., Prof. of Diseases of the Eye and Ear, 169 Dearborn St.
 HENRY M. LYMAN, M.D., Prof. of Chemistry and Pharmacy, 26 N. Ashland Ave.
- CHARLES T. PARKES, M.D., Demonstrator, and Assistant to Professor of Surgery, FRANCIS L. WADSWORTH, M.D., Assistant to Professor of Physiology, E. FLETCHER INGALS, M.D., Assistant to Professor of Materia Medica C. T. FENN, M.D., Assistant to Professor of Obstetrics.

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 - FEES.-Lectures, \$55.00; Matriculation, \$5.00; Dissection, \$5.00; Hospital, \$5.00;
- Graduation, \$25.00. For Annual Announcement, or any information with reference to the College, address the Secretary,

DR. De LASKIE MILLEP.

CODMAN & SHURTLEFE'S APPARATUSES FOR ATOMIZATION OF LIQUIDS FOR INHALATION

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By the Atomizer any medicated liquid may be converted into the finest spray. In this state it may be inhaled into the smallest air-cells, thus opening a new era in the treatment of all diseases of the throat and lungs.

The Complete Steam Atomizer for Inhalation, &c.

Fig. 15. Pat. Mar. 24, 1868 and Mar. 16, 1869.

(See Fig. 15.) It consists of the spear-shaped brass boiler A, steam outlet-tube B, with packing-box C formed to receive rubber packing through which the atomizing tube D passes, steam-tight, and by means of which tubes of various sizes may be tightly held against any force of steam by screwing down its cover while the packing is warm; the safetyvalve E, capable of graduation for high or low pressure by the spring or screw in its top, the non-conducting handle F, by which the boiler may be lifted while hot, the medicament-cup and cup-holder G, the support H, iron base I I, the glass face-shield J, with oval mouth-piece connected by the elastic band K with the cradle L, whose slotted staff passes into a slot in the shield-stand M M. where it may be fixed at any height or angle

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Shurtleff's Atomizing Apparatus. (See Fig. 5.)



Fig. 5. Patented March 24, 1868.

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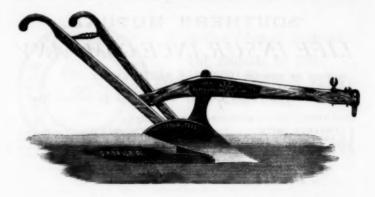
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lously obtained. They are the only waters sold on draught by Hegeman & Co., Caswell, Hazard & Co., and the other leading druggists of New York and the neighboring cities. In cases where other waters have been substituted the difference has been immediately

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Materials for manufacture, in solution or as pay salrs; in both cases reduced to the smallest possible bulk.

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The following testimonials, from gentlemen distinguished for their professional attainments, have been voluntarily tendered to the proprietors of the Louisville Chemical Works:

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by Prof. J. Lawrence Smith at the Louisville Chemical Works, and have no hesitation in saying that they are equal to the best articles to be found in commerce.

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Some of these articles seem to have had the most careful attention devoted to their preparation, ranking them above most of the commercial articles bearing the same name. Among these, special reference may be made to Sweet Spirits Nitre, Chloroform, Sulphuric Ether, Hoffman's Anodyne, Syrup Iodide Iron, Ammonia, and some other important preparations used in medicine. I have used some of these agents in my practice and find them worthy of all confidence. I am pleased to see the chemical arts so much advanced in the West as these preparations seem to indicate. The supervision of Prof. Smith alone would be a sufficient guaranty of their purity and excellence.

to indicate. I he supervision of the supervision of Edinburgh. The tests, viz., Sulphuric Acid in equal quantity, Evaporation, Bichromate of Potash, Nitrate of Silver, and Soubevan's Test furnish precisely the same result, proving that there is really officence in H. A. PROUT, M. D. S. L. C. L Analytic Chemist and Pres't Acad, Sciences, St. Louis.

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CHAS. A. POPE, M. D.

From John P. Hodgen, M. D., Professor of Anatomy and Physiology in Missouri Medical College, St. Louis.

I have used the Chloroform, Sweet Spirits Nitre, and Hoffman's Anodyne, from the Louisville Chemical Works, and take pleasure in stating that they have more fully come up to my desires than any articles of the kind ever used by myself.

JNO. P. HODGEN, M. D.

From E. S. Fraser, M. D., Professor of Obstetrics and the Diseases of Women and Children in Missouri Medical College, St. Louis.

Having used the medicines prepared at the Louisville Chemical Works extensively in my practice, I have no hesitation in recommending them as very superior—more fully meeting the indications described, and more satisfactory in their effects, than any preparations I have ever used.

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With earnest hope for your continued success, I am very truly yours.

T. S. BELL.

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I feel that I am doing a favor to the profession and general public in certifying to the excellence of the various pharmaceutical preparations of your Chemical Works in this city. In purity, scientific accuracy, and in all other regards, your articles fully come up to the requirements of the U.S. Pharmacopoia. I have been greatly pleased with the non-officinal preparations which you have been so kind as to make for me occasionally.

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This preparation is already familiar to medical practitioners as an efficient and agreeable form for administering the bark. The tonic and anti-intermittent properties of the cinchona barks is well established, and they possess but one drawback in their extreme bitterness. This has been overcome to a great extent in the Elixir Calisaya, which, representing twelve grains of calisaya bark in the fluid ounce, is so combined with other ingredients as to make it an agreeable cordial, acceptable to the most delicate stomach.

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ELIXIR CALISAYA FERRATUM.

This valuable Tonic Elixir combines the remedial properties of five grains of Peruvian bark and two grains pyrophosphate of iron, in each tea-spoonful combined with aromatics. The elegant form in which these tonics are exhibited, freedom from the chalybeate taste of similar preparations

and its permanency will recommend it to physicians and consumers.

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This valuable tonic and antiperiodic Elixir contains in each fluid drachm (tea-spoonful) the

This valuable tonic and antiperiodic Elixir contains in each fluid drachin (fea-spoonful) the remedial properties of five grains inchona calisaya, two grains pyrophosphate iron, and one one hundredth grain strychnia, with sufficient aromatics to free it from the chalybeate taste common in similar preparations, which, with its permanency, will recommend it to both physician de consumer. To persons suffering from nervous prostration, symptoms of paralysis, anæmia, arising from diseases peculiar to females, or general debility from any cause whatever, it will commend itself as general therapeutic agent. It also forms one of the most effective remedies ever used to prevent the recurrence of intermittent attacks when the chill is broken.

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Each fluid drachm (tea-spoonful) o this valuable tonic contains the remedial properties of five grains cinchona calisaya bark, two grains pyrophosphate iron, and two grains ammonia citrate issmuth, with aromatics sufficient to render it palatable to a delicate stomach. It is valuable in cases of anemia, chlorosis, and when a general tonic is required: and especially so when such cases are complicated with dyspepsia, irritable condition of the stomach and bowels,

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Each fluid drachm (tea-spoonful) of this valuable tonic and antiperiodic contains the remedial properties of five grains cinchona calisaya bark with two grains of pyrophosphate iron, two grains ammonia citrate bismuth and one one-hundredth grain strychnine with aromatics.

To persons suffering from nervous prostration, intermittent attacks, symptoms of paralysis, anaema, arising from diseases peculiar to females, or general debility, when complicated with dyspepsia, irritable condition of the stomach and bowels, diarrhea, &c., this Elixir will commend itself a valuable therapeutic agent. It is especially valuable as an antiperiodic to prevent the return intermittent attacks whe once broken.

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ELIXIR OF PEPSIN, BISMUTH, AND STRYCHNINE.

This agreeable preparation, although adapted to any form of dyspepsia, is especially valuable in cases where this disease is complicated with general debility.

Each fluid drachm (tea-spoonful) contains five grains pepsine, one one-hundredth grain strych-

uine one grain ammonia citrate bismuth, with aromatics

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Each dessert-spoonful of this valuable and agreeable sedative tonic contains the medicina properties of thirty grains of wild-cherry bark and eight grains citrate of iron. It is especially valuable where the system requires the tonic effect of iron, with an arterial sedative.

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as is too often the case, from fraudulent additions of water to decrease its price. water is injurious not only as a dillient, but is a most efficacious promoter of decomposition. We have samples of this article, manufactured by us more than two years ago, which have remained until now unchanged, although frequently exposed to light and air. This is due not only to the purity of the articles used in its manufacture, but also to the ingenious apparatus devised by Dr. Smith, which thoroughly frees the nitrous ether from every

Our Spts. Nit. Dulce contains five per cent, of pure ether.

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Combining the sedative effect of wild cherry with the powerful hypnotic properties of hydrate of chloral. This has been used with great success by several of our leading phyians, at whose request we offer it to the profession.

Each dessert-spoonful contains the medicinal properties of thirty grains of wild cherry

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This preparation has been used with much success in cases of insomnia caused by

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Each dessert-spoonful (two drachms) contains the remedial properties of fifteen grains of chloral, five grains of hyosyamus leaves, and twenty grains of valerian in solution in syrup and glycerine.

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A powerful general tonic, stomachic, readily assimilable chalybeate, well adapted to certain chlorotic and anaemic states, used in morbid conditions of the nervous system, chronic diseases of the kidneys, many forms of cutaneous diseases where a tonic effect is desired, and in cases of strumous children threatened with scrotulous degeneration, and ultimately with localized tubercular development. One grain of phosphate iron, one grain phosphate quinns, and one thirty-second grain phosphate strychmia to the drachm of syrup

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Recommended by Dr. Andrew Buchanan, of Glasgow, as a means of administering judine in large doses without causing irritation of the stomach. It contains one fourth of one per cent. of iodine, or about one and a half grains to the ounce.

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Suited to the treatment of anemia, resulting from obstinate intermittent fevers, and scrofulous, syphilitic, and cancerous affections. Fifty grains mixed iodides to the ounce.

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The Complete Steam Atomizer for Inhalation, &c.



Fig. 15. Pat. Mar. 24, 1868 and Mar. 16, 1869.

(See Fig. 15.)

It consists of the spear-shaped brass boiler A, steam outlet-tube B, with packingbox C formed to receive rubber packing through which the atomizing tube D passes, steam-tight, and by means of which tubes of various sizes may be tightly held against any force of steam by screwing down its cover while the packing is warm; the safetyvalve E, capable of graduation for high or low pressure by the spring or screw in its top, the non-conducting handle F, by which the boiler may be lifted while hot, the medicament-cup and cup-holder 6, the support H, iron base I I, the glass face-shield J, with oval mouth-piece connected by the elastic band K with the cradle L, whose slotted staff passes into a slot in the shield-stand M M, where it may be fixed at any height or angle

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The waste-cup, medicament-cup and lamp are held in their places in such a manner that Neatly made, strong, black-walnut box, with convenient handle, additional, 2.50

Shurtleff's Atomizing Apparatus. (See Fig. 5.)



Fig. 5 Patented March 24, 1868.

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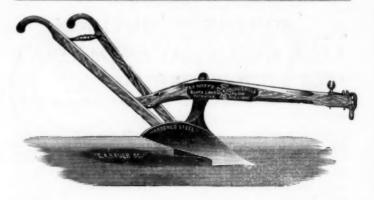
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and pledges himself to his friends and the public that he will spare no pains to render it worthy of its time-honored name.

In its arrangements and appointments he is safe in saying that the Galt House is not surpassed by any hotel in the world.

JILSON P. JOHNSON,

Manager.

HANBURY SMITH'S MINERAL SPRING WATERS

NOTICE.

NEW YORK, MARCH 2, 1870.

Having carefully examined the improved processes adopted in the laboratory of Dr. Hanbury Smith, and ANALYZED samples of the MINERAL SPRING WATERS which he offers for sale, I am prepared to testify that the Waters are manufactured with the most intelligent and conscientious care, and are every way reliable substitutes for the natural waters. The public estimation in which Dr. Smith's preparations are held is thus amply justified by my investigations and analyses.

CHARLES A. SEELY,

Late Prof. of Chemistry and Toxicology in the New York Medical College,
and of Chemistry and Metallurgy in the New York College of Dentistry.

The attention of the trade is invited to the following facts:

Dr. Smith's waters were the first ever placed in market on a large scale in the United States

States.

Their excellence created the demand for such goods, and made the business wholesale. They exactly represent the natural waters, producing identical medicinal effects. Their indisputable superiority has made them more popular than any other.

They are more extensively prescribed in daily practice, and used by physicians themselves, than any other—a spontaneous and emphatic indorsement, certainly not surreptitiously obtained.

They are the any vertex sold on draught by Heggman & Co. Caswell, Hazard & Co.

They are the only waters sold on draught by Hegeman & Co., Caswell, Hazard & Co., and the other leading druggists of New York and the neighboring cities.

In cases where other waters have been substituted the difference has been immediately

detected by the public, and loss of custom has compelled a return to Dr. Smith's.

Materials for manufacture, in solution or as buy salrs; in both cases reduced to the smallest possible bulk.

Druggists visiting New York are cordially invited to visit the laboratory at 35 Union Square.

HANBURY SMITH & HAZARD.

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BROWNING & SLOAN. Druggists & Apothecaries' Hall

Nos. 7 AND 9 EAST WASHINGTON STREET,

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DRUGS, MEDICINES, CHEMICALS,

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And all articles usually kept in a first-class Drug-house.

Our stock is large, and in variety and detail not surpassed by any house in the country, and which we are prepared to sell as low as any Western house. Orders respectfully solicited. All articles warranted as represented.

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Agent for TIEMANN & CO.'S SURGICAL AND DENTAL INSTRU-MENTS, comprising Amputating, Dissecting, Pocket, Trephining and Obstetric Instruments, Specula, Inhalers, Fever Thermometers, Pessaries, Elastic Stockings, Trusses, Supporters, etc., which are sold at manufacturers' prices. Special attention paid to orders from country physicians. Agent for

Dr. L. A. BABCOCK'S SILVER UTERINE SUPPORTER

For the cure of Prolapsus, Retroversion, and Anteversion. Warranted a Radical Cure. Price, \$25. Price to Physicians, \$16.



Dr. L. A. Babcock's SILVER UTERINE SUP-PORTER, for the cure of Prolapsus, Retroversion and Anteversion. Warranted a radical cure. Price, \$25.00.

OUINCY, ILL.

We would respectfully call the attention of the profession to Dr. L. A. BABCOCK'S improvement in Uterine Supporters. These instruments derive their support from an external brace, and are destined to entirely supersede the old-fashioned, uncomfortable and useless pessary. They are easily adjusted, and so comfortable and advantageous to the wearer that patients who have long been confined to their beds or rooms with uterine difficulties express themselves as having "gotten into a new world" upon having a sup-porter applied. We speak thus posi-tively of these instruments because we have thoroughly tested them.

DRS. CURTIS & MCMAHAN.

DUBUQUE, IOWA.

DEAR SIR: Yours, with instructions, to hand. I speak as a lecturer on obstetrics and a physician of large experience in the treatment of uterine diseases, when I say that the more I become familiar with your invention the more valuable it appears to me; and I would like to see the thing extensively used, for it supplies a want long felt.

EDWARD A. GILBERT, M. D.

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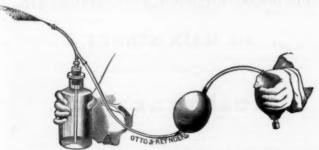
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64 CHATHAM STREET, NEW YORK,

Manufacturers and Importers of SURGICAL and ORTHOPEDICAL INSTRUMENTS.



Every apparatus for Local Anæsthesia and for Atomization of Liquids, Laryngoscopes, Syringes, Splints for Hip-Joint Disease, Skeletons, Trusses, Elastic Stockings, Laminaria Digitata, Uterine Tents, Axilla Thermometers, Beigel's Inhaler and Powder, etc.

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And new inventions on hand and received constantly from our Agents in Europe.

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LOUISVILLE, KY.

We aim to supply the regular Druggist and Apothecary as well as the Physician with TRUE, GENUINE, and STANDARD ARTICLES in our line of trade, and we warrant everything we sell to be as represented.

We are AGENTS for TIEMANN'S CELEBRATED SURGICAL IN-STRUMENTS, which we sell at his prices.

We also keep all the approved New Remedies as they are brought into notice.

We are AGENTS for GRIMAULT & CO., of PARIS, and sell his specialties as low as they can be bought on this continent, as we import direct. v3, I—IV

W. G. REDMAN, President. T. W. STARBIRD, Secretary. WM. INGRAM, Treasurer.

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I. LAWRENCE SMITH, M. D. J. P. BARNUM, M. D.

LOUISVILLE CHEMICAL WORKS

UNDER DIRECTION OF

J. LAWRENCE SMITH, M. D.

OFFER TO THE TRADE, OF OUR OWN MANUFACTURE, ALL THE CHEMICALS USED IN THE ARTS:

Strictly pure Chemicals for Medical Use

ALL STANDARD PHARMACEUTISTS' PREPARATIONS IN MEDICINE

All our Formulæ are published from time to time in the various Medical and Pharmaceutical journals for the benefit of the profession. WE HAVE NO PRIVATE FORMULÆ, and CLAIM NO PROPRIETARY RIGHTS IN ANY GOODS OF OUR PREPARATION.

The following testimonials, from gentlemen distinguished for their professional attainments, have been voluntarily tendered to the proprietors of the Louisville Chemical Works:

From H. A. Prout, M. D., President of the Academy of Sciences, St. Louis.

I have carefully examined the specimens of Chemical and Medical preparations manufactured by Prof. J. Lawrence Smith at the Louisville Chemical Works, and have no hesitation in saying that they are equal to the best articles to be found in commerce.

that they are equal to the best articles to be found in commerce.

The most valuable in the following list have been submitted to analysis, and others to a critical inspection, and were found to be most beautifully and neatly prepared: Aqua Ammonia, Chloroform, Spirits Nitre, Hoffman's Anodyne, Sulphuric Ether, Spirits Ammonia Aromatic, Syrup of the Hypophosphites, Hypophosphite of Quinne, Phosphate Zinc, etc.

Some of these articles seem to lave had the most careful attention devoted to their preparation, ranking them above most of the commercial articles bearing the same name. Among these, special reference may be made to Sweet Spirits Nitre, Chloroform, Sulphuric Ether, Hoffman's Anodyne, Syrup Iodide Iron, Ammonia, and some other important preparations used in medicine. I have used some of these agents in my practice and find them worthy of all confidence.

I am pleased to see the chemical arts so much advanced in the West as these preparations seem to indicate. The supervision of Prof. Smith alone would be a sufficient guaranty of their purity and excellence.

and excellence. and excellence.

Two samples of your chloroform were tested by the usual tests, and we believe them to be chemically pure. They were compared with a specimen from the house of Tromsdorff, of Berlin, Prussia, and also one from the manufactory of Flockhart & Duncan, of Edinburgh. The tests, viz., Sulphuric Acid in equal quantity, Evaporation, Bichromate of Potash, Nitrate of Silver, and Soubevan's Test furnish precisely the same result, proving that there is really no difference in their purity.

H. A. PROUT, M. D. their purity. Analytic Chemist and Pres't Acad. Sciences, St. Louis,

From Charles A. Pope, M. D., St. Louis.

For several years I have had occasion to use a number of the preparations from the Louisville For several years I have had occasion to use a number of the preparations from the Louisville Chemical Works. It affords me pleasure to declare my conviction of their great excellence as gravity. The high character of Prof. Smith as a gentleman and chemist is a sufficient guaranty to the public of their superior quality. By thus affording pure and reliable medicines guaranty to the public will be gainers, while it is hoped that the cheaper and adulterated articles will be, as they ought, thrust from the market. I gladly wish them the extensive sale which their merit demands.

CHAS. A. POPE, M. D.

From John P. Hodgen, M. D., Professor of Anatomy and Physiology in Missouri Medical College, St. Louis.

I have used the Chloroform, Sweet Spirits Nitre, and Hoffman's Anodyne, from the Louisville Chemical Works, and take pleasure in stating that they have more fully come up to my desires than any articles of the kind ever used by myself.

JNO. P. HODGEN, M. D.

From E. S. Frazer, M. D., Professor of Obstetrics and the Diseases of Women and Children in Missouri Medical College, St. Louis.

Having used the medicines prepared at the Louisville Chemical Works extensively in my practice, I have no hesitation in recommending them as very superior—more fully meeting the indica-tions described, and more satisfactory in their effects, than any preparations I have ever used. E. S. FRAZER, M. D.

From B. J. Allen, M. D., St. Louis,

You desire my opinion of the therapeutical virtues of the preparations made by Prof. J. Law-rence Smith, of Louisville. It affords me pleasure to say that I have found the preparatious which I have used in my practice efficient and reliable, and believe them to be superior to any manufactured. B. J. ALLEN, M. D.

From Dr. T. S. Bell, of the University of Louisville.

I take pleasure in discharging gratefully a duty I owe to I take pleasure in discharging gratefully a duty I owe to your excellent preparations for medical purposes. From ample experience, I am able to say that I have found all your preparations fully equal to all the requirements of the U.S. Pharmacopeia. I could not be induced to use any other Chloroform for inducation than yours, or that prepared by Dr. Squibb, of Brooklyn. I have found your Hoffman's Anodyne, Sweet Spirits of Nitre, various Fluid Extracts, and other important agents of the Materia Medica invaluable in the practice of medicine. I am sure that physicians who may test the medicines they order for their patients will find yours pure in every particular. With earnest hope for your continued success I am very truly yours,

From Prof. Lewis Rogers, of the University of Louisville.

I feel that I am doing a favor to the profession and general public in certifying to the excellence of the various pharmaceutical preparations of your Chemical Works in this city. In purity, scientific accuracy, and in all other regards, your articles fully come up to the requirements of the U. S. Pharmacopeia. I have been greatly pleased with the non-officinal preparations which you have been so kind as to make for me occasionally. ke for me occasionally.
LEWIS ROGERS, M. D. Very truly,

FLUID AND SOLID EXTRACTS.

Prepared strictly according to the requirements of the U.S. Pharmacopaia, when Officinal; and, when non-officinal, according to the most approved formula,

when each pint represents sixteen Trov ounces of the drug.

It is an unfortunate circumstance that so many manufacturers of Pharmaceutical Preparations ignore the national standard and furnish "improved" articles of an arbitrary and unknown strength, generally to reduce the cost. In regard to the so-called improvements, it is enough for us to know that they have been carefuly examined during the past year by those most competent to decide (the revisors of the Pharmacopaia) and have not been adopted.

It would be well for physicians to add "L. C. W." in prescribing or ordering this class of medicines, to prevent the substitution of preparations meritorious perhaps, but of whose strength

and method of preparation they can have no definite information.

While it is generally preferable to prepare Syrups, Tinctures, Wines, &c., from the crude material itself, it is frequently necessary to prepare these extemporaneously, for which reason each label embodies formulæ for preparing them from the Fluid Extracts.

CHLOROFORMUM PURIFICATUM, U. S. P.

A perfectly pure and reliable article of Chloroform was first offered to the public at these Works. The formula for its production was originated by our Dr. J. LAWRENCE SMITH, under whose direction it is still made. It is regarded throughout the South and West as a standard of purity, and yields a product which, while prompt in its action, is at the same time safe. (See analysis of Dr. H. A. Prout.) It not only is considered a standard of purity in the United States, but is used P. A. From.) It not only is considered a standard of purity in the United States, but a used by the most distinguished oculists in Europe, who do not feel justified in using any other than "Smith" chloroform to produce the deep coma required for their delicate operations (Remarks of D. W. Yandell, Professor of Clinical Surgery, University of Louisville.)

SULPHURIC ETHER AND HOFFMAN'S ANODYNE.

But one grade of these articles is made here, and that the strictly officinal article. They are prepared with the greatest care and put up in sealed packages, which may be regarded as the guarantee of the Company that the contents are of the best character, and will stand any chemical test and any reasonable exposure to which they may be subjected.

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COMPOUND SYRUP OF THE HYPOPHOSPHITES (Churchill's Remedy).

The reputation of this Syrup, as produced at these Works, is so well established that it is used almost to the entire exclusion of the syrup of other manufacturers. It is a handsome and palatable article, prepared according to the process suggested by Dr. Churchill, of Paris, and communicated by him to Dr. Smith, who was the first to introduce its manufacture into the United States. Each fluid drachm contains the hypophosphites of lime two and a half grains, soda one and a half grains, potash one grain, and iron three fourths of a grain.

COMPOUND SYRUP OF PHOSPHATES (Chemical Food).

Like the provious article this preparation was first manufactured in this country at these works. Our process has always produded an article of uniform strength, which is palatable to the taste and remains clear and unchanged for years.

It is considered very useful in the treatment of softening of the bones, marasmus, nervous debility, tuberculous and other analogous diseases.

Each fluid drachm contains one grain phosphate of iron, two and a half grains phosphate of hime, with small amounts of other phosphates.

ELIXIR CALISAVA.

This preparation is already familiar to medical practitioners as an efficient and agreeable form for administering the bark. The tonic and anti-intermittent properties of the cinchona barks is well established, and they possess but one drawback in their extreme bitterness. This has been overcome to a great extent in the Elixir Calisaya, which, representing twelve grains of calisaya bark in the fluid ounce, is so combined with other ingredients as to make it an agreeable cordial, acceptable to the most delicate stomach.

To persons suffering from dyspepsia, indigestion, general debility from sickness or other causes etc., it will prove invaluable. It will be found one of the best and at the same time harmless preventives for fever and ague to persons exposed to its influences.

ELIXIR CALISAYA FERRATUM.

This valuable Tonic Elixir combines the remedial properties of five grains of Peruvian bark and two grains pyrophosphate of iron, in each tea-spoonful combined with aromatics. The elegant form in which these tonics are exhibited, freedom from the chalybeate taste of similar preparations and its permanency will recommend it to physicians and consumers.

The working formula was published in Volume XL of the American Journal of Pharmacy.

ELIXIR CALISAYA FERRATUM WITH STRYCHNIA

This valuable tonic and antiperiodic Elixir contains in each fluid drachm (tea-spoonful) the remedial properties of five grains cinchona calisaya, two grains pyrophosphate iron, and one one hundredth grain strychnia, with sufficient aromatics to free it from the chalybeate taste common in similar preparations, which, with its permanency, will recommend it to both physician and consumer.

To persons suffering from nervous prostration, symptoms of paralysis, anæmia, arising from diseases peculiar to females, or general debility from any cause whatever, it will commed itself as general therapeutic agent. It also forms one of the most effective remedies ever used to prevent the recurrence of intermittent attacks when the chill is broken.

the recurrence of intermittent attacks when the chill is broken.

ELIXIR CALISAYA FERRATUM WITH BISMUTH.

Each fluid drachm (tea-spoonful) o this valuable tonic contains the remedial properties of five

grains cinchona calisaya bark, two grains pyrophosyhate iron, and two grains ammonia citrate sismuth, with aromatics sufficient to render it palatable to a delicate stomach. It is valuable in cases of anæmia, chlorosis, and when a general tonic is required; and especially so when such cases are complicated with dyspepsia, irritable condition of the stomach and bowels,

ELIXIR CALISAYA FERRATUM WITH BISMUTH AND STRYCHNINE.

Each fluid drachm (tea-spoonful) of this valuable tonic and antiperiodic contains the remedial properties of five grains cinchona calisaya bark with two grains of pyrophosphate iron, two grains ammonia citrate bismuth and one one-hundredth grain strychnine with aromatics.

ammonia currate pismutul and one one-nundredth grain strychnine with aromatics.

To person suffering from nervous prostration, intermittent attacks, symptoms of paralysis, anæmia, arising from diseases peculiar to females, or general debility, when complicated with dyspepsia, irritable condition of the stomach and bowels, diarrhea, &c., this Elixir will commend itself a valuable therapeutic agent. It is especially valuable as an antiperiodic to prevent the return intermittent attacks whe once broken.

ELIXIR OF PEPSIN, BISMUTH, AND STRYCHNINE.

This agreeable preparation, although adapted to any form of dyspepsia, is especially valuable in cases where this disease is complicated with general debility.

Each fluid drachm (tea-spoonful) contains five grains pepsine, one one-hundredth grain strych-

nine, one grain ammonia citrate bismuth, with aromatics.

FERRATED WINE OF WILD-CHERRY.

Each dessert-spoonful of this valuable and agreeable sedative tonic contains the medicina toperties of thirty grains of wild-cherry bark and eight grains citrate of iron. It is especially valuable where the system requires the tonic effect of iron, with an arterial sedative.

PEPSIN.

We are preparing Pepsin for our own use, and in a limited amount for the trade, after the formula of M. Boudault, using only the rennet of calves. Fifteen grains of the powder contain three grains of pure pepsin.

WINE OF PEPSIN.

Wine of Pepsin carefully prepared from fresh calves' rennets. Each fluid ounce contains five grains of pepsin in solution in pure old Sherry wine.

HYDRATE CHLORAL.

We are now manufacturing Hydrate of Chloral of undoubted purity in sufficient quantities to meet all demands on us. Our apparatus was designed by Dr. J. Lawrence Smith, under whose personal supervision it is made.

SPIRITUS ÆTHERIS NITRICL

Sweet Spirits of Nitre has fallen into disuse with many practitioners in consequence of its liability to decomposition. This is owing either to want of care in its manufacture, or, as is too often the case, from fraudulent additions of water to decrease its price. Water is injurious not only as a diluent, but is a most efficacious promoter of decomposition.

We have samples of this article, manufactured by us more than two years ago, which have remained until now unchanged, although frequently exposed to light and air. This is due not only to the purity of the articles used in its manufacture, but also to the ingenous apparatus devised by Dr. Smith, which thoroughly frees the nitrous ether from every trace of nitrous acid.

Our Spts. Nit. Dulce contains five per cent, of pure ether.

SYRUP OF HYDRATE OF CHLORAL AND WILD-CHERRY.

Combining the sedative effect of wild cherry with the powerful hypnotic properties of Combining the sedative effect of wild cherry with the powerful hypothe properties of hydrate of chloral. This has been used with great success by several of our leading physicians, at whose request we offer it to the profession.

Each dessert-spoonful contains the medicinal properties of thirty grains of wild cherry and fifteen grains of hydrate of chloral in solution in glycerine and syrup.

SYRUP HYDRATE OF CHLORAL, HYOSCYAMUS AND VALERIAN.

This preparation has been used with much success in cases of insomnia caused by hysteric nervousness, mental depression, mania, female diseases, etc.

Each dessert-spoonful (two drachms) contains the remedial properties of fifteen grains of chloral, five grains of hyoscyamus leaves, and twenty grains of valerian in solution in

syrup and glycerine.

SYRUP PHOSPHATE IRON, QUININE, AND STRYCHNINE.

A powerful general tonic, stomachic, readily assimilable chalybeate, well adapted to certain chlorotic and anemic states, used in morbid conditions of the nervous system, chronic diseases of the kidneys, many forms of cutaneous diseases where a tonic effect is desired, and in cases of strumous children threatened with scrofulous degeneration, and ultimately with localized tubercular development. One grain of phosphate iron, one grain phosphate quinia, and one thirty-second grain phosphate estrychnia to the drachm of syrup

SYRUP IODIDE OF STARCH.

Recommended by Dr. Andrew Buchanan, of Glasgow, as a means of administering iodine in large doses without causing irritation of the stomach. It contains one fourth of one per cent. of iodine, or about one and a half grains to the ounce.

SYRUP IODIDE OF IRON AND MANGANESE.

Suited to the treatment of anamia, resulting from obstinate intermittent fevers, and acrofulous, syphilitic, and cancerous affections. Fifty grains mixed iodides to the ounce.

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Silver and Plated Ware

TABLE CUTLERY MUSIC BOXES, AND MASONIC JEWELS,

114 WEST MAIN STREET. LOUISVILLE, KY.

Silver Ware made to Order. Special attention to Orders C. O. D., with privilege.

MEMPHIS MEDICAL COLLEGE.

Medical Department of Cumberland University. MEMPHIS, TENN.

The Nineteenth Annual Course of Lectures will commence on Monday, October 16, 1871, and continue till the 1st of March. Since its last session the Memphis Medical College has become the Medical Department of Cumberland University, located at Lebanon, Tenn., and as such is permanently established in Memphis.

FACULTY.

ALEXANDER ERSKINE, M. D., DEAN, Professor of Obstetrics and Diseases of Women and

BENJ, W. AVENT, M. D., Professor of the Principles and Practice of Surgery. DUDLEY D. SAUNDERS, M. D., Professor of Descriptive and Surgical Anatomy, RICHARD B. MAURY, M. D., Professor of the Principles and Practice of Medicine. ROBERT W. MITCHELL, M. D., Professor of Materia Medica and Therapeutics. ALFRED H. VOORHIES, M. D., Professor of Aural and Ophthalmic Surgery. J. JOSEPH WILLIAMS, M. D., Professor of Physiology and Physiological Anatomy. FELIX McFARLAND, M. D., Professor of Chemistry and Toxicology. GUSTAVUS B. THORNTON, M. D., Demonstrator of Anatomy. ROBERT THUMEL, M. D., Prosector to the Professor of Anatomy.

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CODMAN & SHURTLEFF'S

ATOMIZATION OF LIQUIDS FOR INHALATION

LOCAL ANÆSTHESIA, &.c.

By the Atomizer any medicated liquid may be converted into the finest spray. In this state it may be inhaled into the smallest air-cells, thus opening a new era in the treatment of all diseases of the throat and lungs.

The Complete Steam Atomizer for Inhalation, &c.

It comboiler A, stabox C for through whateam-tigh of various s any force of cover while valve E, ca low pressu top, the no the boiler m cament-cup H, iron bas oval mouth band K wite

Fig. 15." Pat. Mar. 24, 1868 and Mar. 16, 1869.

It consists of the spear-shaped brass boiler A, steam outlet-tube B, with packing-box C formed to receive rubber packing through which the atomizing tube D passes, steam-tight, and by means of which tubes of various sizes may be tightly held against any force of steam by screwing down its cover while the packing is warm; the safety-valve E, capable of graduation for high or low pressure by the spring or screw in its top, the non-conducting handle F, by which the boiler may be lifted while hot, the medicament-cup and cup-holder G, the support H, iron base I I, the glass face-shield J, with oval mouth-pie a connected by the elastic band K with the cradle L, whose slotted staff passes into a slot in the shield-stand M M, where it may be fixed at any height or angle required by the milisarraw N.

Shurtleff's Atomizing Apparatus. (See Fig. 5.)



Fig. 5. Patented March 24, 1868.

For Inhalation, and, with suitable tubes, for Local Anæsthesia, and for making direct local applications of atomized liquids for a great variety of purposes. (See our pamphlet.)

25 Each of the above Apparatuses is supplied with two carefully-made annualed glass Atomizing Tubes, and

annealed glass Atomising Tubes, and accompanied with directions for use. Every Steam Apparatus is tested with steam at very high pressure. Each apparatus is carefully packed for transportation, and warranted perfect. Also,

N. B. To save collection expenses, funds should be sent with the order, either in form of draft, post-office order, or registered letter.

(For complete illustrated Price-list of Apparatus, Tubes, &c., see Pamphlet.)

Will be sent by mail (post-paid), on application, a Pamphlet containing two articles, by distinguished foreign authority, on

"INHALATION OF ATOMIZED LIQUIDS,"

With formulæ of those successfully employed. Also, an article by Dr. J. L. W. Thudichus, M. R. C. P., on "A New Mode of Treating Diseases of the Nasal Cavity," with his formulæ. Also an illustrated description of the best apparatuses for the above purposes, and for

Also an interrated description of the osst apparatuses for the above purposes, and for producing LOCAL AN-ESTHESIA by Atomization with Ether, by the method of Dr. Richardson, of London; or with Rhigolene, as described by Dr. Henry J. Bioglow, in the Boston Medical and Surgical Journal of April 19, 1865.

ALL OUR ATOMIZING INSTRUMENTS are made with the utmost care, with a view to their complete efficiency, convenience, and durability, and every one is warranted. A Gold Medal has lately been awarded us by the Middlesex Mechanics Association for Atomising and Surgical Instruments, as will be seen from the following report, signed by a leading New England Surgeon and Physician:

leading New England Surgeon and Physician:

"1503. Codman & Shurtleff, Boston. One Case Surgical Instruments and Atomizers.—
The Committee have no hesitation in awarding for this superb exhibition the highest premium. . . . The various other intruments for Inhalation of Atomized Liquida and for Local Ansesthesia were all apparently faultless, both in design and workmanship. The exhibitors are regarded as more especially deserving of the highest token of merit for having produced nothing except of their own manufacture.—Gold Medal.

(Signed)

GILMAN KIMBALL, M. D., Chairman."

Also, by the Massachusetts Charitable Mechanics Association—Exhibition of 1869—A Silver Medal, the Highest Medal awarded for Surgical Instruments.

ALSO FOR SALE.

ALBO FOR SALE.			
Cammann's Stethoscopes: Disarticulating	French Rubber Urinals, with valves, male, for night or day		
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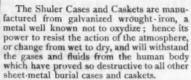
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The retirement of C. C. Cox, M. D., LL. D., as editor, is followed by the advent of two gentlemen well known to the profession here, and we doubt not that they will keep the Journal solely as a high-toned medical work, worthy of a

place on the table of every physician in the land.

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Spring and Summer Session of 1872.

The Spring and Summer Session of the above School of Medicine will commence March 13th, 1872, and continue until July 1st. The following Clinical and Didactic courses will be given:

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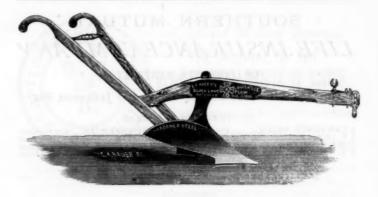
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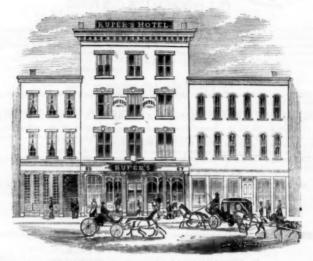
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DEAR SIR: Yours, with instructions, to hand. I speak as a lecturer on obstetrics and a physician of large experience in the treatment of uterine diseases, when I say that the more I become familiar with your invention the more valuable it appears to me; and I would like to see the thing extensively used, for it supplies a want long felt.

Dr. L. A. Babcock's Silver Uterine Sup-porter, for the cure of Prolapsus, Retrover ion and Anteversion. Warranted a radical care. Price, \$25.00.

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Every apparatus for Local Anæsthesia and for Atomization of Liquids, Laryngoscopes, Syringes, Splints for Hip-Joint Disease, Skeletons, Trusses, Elastic Stockings, Laminaria Digitata, Uterine Tents, Axilla Thermometers, Beigel's Inhaler and Powder, etc.

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The following testimonials, from gentlemen distinguished for their professional attainments, have been voluntarily tendered to the proprietors of the Louisville Chemical Works:

From H. A. Prout, M. D., President of the Academy of Sciences, St. Louis.

I have carefully examined the specimens of Chemical and Medical preparations manufactured by Prof. J. Lawrence Smith at the Louisville Chemical Works, and have no hesitation in saying that they are equal to the best articles to be found in commerce.

The most valuable in the following list have been submitted to analysis, and others to a critical inspection, and were found to be most beautifully and neatly prepared: Aqua Ammonia, Chloroform, Spirits Nitre, Hoffman's Anodyne, Sulphuric Ether, Spirits Ammonia Aromatic, Syrup of the Hypophosphites, Hypophosphite of Quinine, Phosphate Zinc, etc.

Some of these articles seem to have had the most careful attention devoted to their prepara-

Some or these arricles seem to have had the most careful attention devoted to their preparation, ranking them above most of the commercial articles bearing the same name. Among these special reference may be made to Sweet Spirits Nitre, Chloroform, Sulphuric Ether, Hoffman's Anodyne, Syrup Iodide Iron, Ammonia, and some other important preparations used in medicine. I have used some of these agents in my practice and find them worthy of all confidence.

I am pleased to see the chemical arts so much advanced in the West as these preparations seem in the confidence.

to indicate. The supervision of Prof. Smith alone would be a sufficient guaranty of their purity

and excellence.

Two samples of your chloroform were tested by the usual tests, and we believe them to be chemically pure. They were compared with a specimen from the house of Tromsdorff, of Berlin, Prussia, and also one from the manufactory of Flockhart & Duncan, of Edinburgh. The tests, viz., Suiphuric Acid in equal quantity, Evaporation, Bichromate of Potash, Nitrate of Silver, and Soubevan's Test furnish precisely the same result, proving that there is really no difference in their purity.

H. A. PROUT, M. D.,

H. A. PROUT, M. D.,

Land Sciences, St. Louis Analytic Chemist and Pres't Acad. Sciences, St. Louis.

From Charles A. Pope, M. D., St. Louis.

For several years I have had occasion to use a number of the preparations from the Louisville For several years I have had occasion to use a number of the preparations from the Loquisville Chemical Works. It affords me pleasure to declare my conviction of their great excellence and furify. The high character of Prof. Smith as a gentleman and chemist is a sufficient guaranty to the public of their superior quality. By thus affording pure and reliable medicines both the profession and the public will be gainers, while it is hoped that the cheaper and adulterated articles will be, as they ought, thrust from the market. I gladly wish them the extensive sale which their merit demands.

CHAS. A. POPE, M. D.

From John P. Hodgen, M. D., Professor of Anatomy and Physiology in Missouri Medical College, St. Louis.

I have used the Chloroform, Sweet Spirits Nitre, and Hoffman's Anodyne, from the Louisville Chemical Works, and take pleasure in stating that they have more fully come up to my desires than any articles of the kind core used by myself.

JNO. P. HODGEN, M. D.

From E. S. Frazer, M. D., Professor of Obstetrics and the Diseases of Women and Children in Missouri Medical College, St. Louis.

Having used the medicines prepared at the Louisville Chemical Works extensively in my practice, I have no hesitation in recommending them as very superior—more fully meeting the indications described, and more satisfactory in their effects, than any preparations I have ever used. D. E. S. FRAZER. M. D.

From B. J. Allen, M. D., St. Louis.

You desire my opinion of the therapeutical virtues of the preparations made by Prof. J. Lawrence Smith, of Louisville. It affords me pleasure to say that I have found the preparatious which I have used in my practice efficient and reliable, and believe them to be superior to any manufactured.

B. I. ALLEN, M. D.

From Dr. T. S. Bell, of the University of Louisville.

I take pleasure in discharging gratefully a duty I owe to your excellent preparations for medical purposes. From ample experience, I am able to say that I have found all your preparations fully equal to all the requirements of the U.S. Pharmacopæia. I could not be induced to use any other Chloroform for inhalation than yours, or that prepared by Dr. Squibb, of Brooklym. I have found your Hoffman's Anodyne, Sweet Spirits of Nitre, various Fluid Extracts, and other important agents of the Materia Medica invaluable in the practice of medicine. I am sure that physicians who may test the medicines they order for their patients will find yours pure in every particular.

With earnest hope for your continued success, I am very truly yours.

I am very truly yours.

From Prof. Lewis Rogers, of the University of Louisville.

general public in certifying to the excellence of the various pharmaceutical preparations of your Chemical Works in this city. In purity, scientific accuracy, and in all other regards, your articles fully come up to the requirements of the U.S. Pharmacopoia. I have been greatly pleased with the non-officinal preparations which you have been so kind as to make for me occasionally.

Very truly,

LEWIS ROGERS, M. D.

FLUID AND SOLID EXTRACTS.

Prepared strictly according to the requirements of the U.S. Pharmacopaia, when Officinal; and, when non-officinal, according to the most approved formula, when each pint represents sixteen Troy ounces of the drug.

It is an unfortunate circumstance that so many manufacturers of Pharmaceutical Preparations ignore the national standard and furnish "improved" articles of an arbitrary and unknown strength, generally to reduce the cost. In regard to the so-called improvements, it is enough for us to know that they have been carefuly examined during the past year by those most competent to decide (the revisors of the Pharmacopaia) and have not been adopted.

It would be well for physicians to add "L. C. W." in prescribing or ordering this class of medicines, to prevent the substitution of preparations meritorious perhaps, but of whose strength and method of preparation they can have no definite information.

While it is generally preferable to prepare Syrups, Tinctures, Wines, &c., from the crude material itself, it is frequently necessary to prepare these extemporaneously, for which reason each label embodies formulæ for preparing them from the Fluid Extracts.

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A perfectly pure and reliable article of Chloroform was first offered to the public at these Works. The formula for its production was originated by our Dr. J. LAWRENCE SMITH, under whose direction it is still made. It is regarded throughout the South and West as a standard of purity, and yields a product which, while prompt in its action, is at the same time safe. (See analysis of Dr. H. A. Pront.) It new only is considered a standard of purity in the United States, but is used by the most distinguished cculists in Europe, who do not feel justified in using any other than "Smith" chloroform to produce the deep coma required for their delicate operations (Remarks of D. W. Yandell, Professor of Clinical Surgery, University of Lonixville.)

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But one grade of these articles is made here, and that the strictly officinal article. They are prepared with the greatest care and put up in sealed packages, which may be regarded as the guarantee of the Company that the contents are of the best character, and will stand any chemical test and any reasonable exposure to which they may be subjected.

COMPOUND SYRUP OF THE HYPOPHOSPHITES (Churchill's Remedy).

The reputation of this Syrup, as produced at these Works, is so well established that it is used almost to the entire exclusion of the syrup of other manufacturers. It is a handsome and palatable article, prepared according to the process suggested by Dr. Churchill, of Paris, and communicated by him to Dr. Smith, who was the first to introduce its manufacture into the United States. Each fluid drachm contains the hypophosphites of lime two and a half grains, potash one grain, and iron three fourths of a grain.

COMPOUND SYRUP OF PHOSPHATES (Chemical Food).

Like the provious article this preparation was first manufactured in this country at these works Our process has always produded an article of uniform strength, which is palatable to the taste and remains clear and unchanged for years.

It is considered very useful in the treatment of softening of the bones, marasmus, nervous debility, tuberculous and other analogous diseases.

Each fluid drachm contains one grain phosphate of iron, two and a half grains phosphate o lime, with small amounts of other phosphates.

ELIXIR CALISAVA.

This preparation is already familiar to medical practitioners as an efficient and agreeable form for administering the bark. The tonic and anti-intermittent properties of the cinchona barks is well established, and they possess but one drawback in their extreme bitterness. This has been overcome to a great extent in the Elixir Calisaya, which, representing twelve grains calisaya bark in the fluid ounce, is so combined with other ingredients as to make it an agreeable cordial, acceptable to the most delicate stomach.

To persons suffering from dyspepsia, indigestion, general debility from sickness or other causes etc., it will prove invaluable. It will be found one of the best and at the same time harmless preventives for fever and ague to persons exposed to its influences.

ELIXIR CALISAYA FERRATUM.

This valuable Tonic Elixir combines the remedial properties of five grains of Peruvian bark and two grains pyrophosphate of iron, in each tea-spoonful combined with aromatics. The elegant form in which these tonics are exhibited, freedom from the chalybeate taste of similar preparations

and its permanency will recommend it to physicians and consumers.

The working formula was published in Volume XL. of the American Journal of Pharmacy.

ELIXIR CALISAYA FERRATUM WITH STRYCHNIA.

This valuable tonic and antiperiodic Elixir contains in each fluid drachm (tea-spoonful) the remedial properties of five grains cinchona calisaya, two grains pyrophosphate iron, and one one hundredth grain strychnia, with sufficient aromatics to free it from the chalybeate taste common in similar preparations, which, with its permanency, will recommend it to both physician and consumer.

To persons suffering from nervous prostration, symptoms of paralysis, anemia, arising from diseases peculiar to females, or general debility from any cause whatever, it will commend itself as general therapeutic agent. It also forms one of the most effective remedies ever used to prevent

the recurrence of intermittent attacks when the chill is broken.

ELIXIR CALISAYA FERRATUM WITH BISMUTH.

Each fluid drachm (tea-spoonful) o this valuable tonic contains the remedial properties of five

grains cinchona calisaya bark, two grains pyrophosphate iron, and two grains ammonia citrate ismuth, with aromatics sufficient to render it palatable to a delicate stomach. It is valuable in cases of anemia, chlorosis, and when a general tonic is required; and especially so when such cases are complicated with dyspepsia, irritable condition of the stomach and bowels, chronic diarrhea,

ELIXIR CALISAYA FERRATUM WITH BISMUTH AND STRYCHNINE.

Each fluid drachm (tea-spoonful) of this valuable tonic and antiperiodic contains the remedial

Each fluid drachm (tea-spoonful) of this valuable tonic and antiperiodic contains the remedial properties of five grains cinchona calisaya bark with two grains of pyrophosphate iron, two grains ammonia citrate bismuth and one one-hundredth grain strychnine with aromatics.

To person suffering from nervous prostration, intermittent attacks, symptoms of paralysis, anæma, arising from diseases peculiar to females, or general debility, when coinplicated with dyspepsia, irritable condition of the stomach and bowels, diarrhea, &c., this Elixir will commend itself a valuable therapeutic agent. It is especially valuable as an antiperiodic to prevent the return intermittent attacks whe once broken.

ELIXIR OF PEPSIN, BISMUTH, AND STRYCHNINE.

This agreeable preparation, although adapted to any form of dyspepsia, is especially valuable in cases where this disease is complicated with general debility.

Each fluid drachm (tea-spoonful) contains five grains pepsine, one one-hundredth grain strych-

nine, one grain ammonia citrate hismuth, with aromatics

FERRATED WINE OF WILD-CHERRY

Each dessert-spoonful of this valuable and agreeable sedative tonic contains the medicina roperties of thirty grains of wild-cherry bark and eight grains citrate of iron. It is especially valuable where the system requires the tonic effect of iron, with an arterial sedative.

PEPSIN.

We are preparing Pepsin for our own use, and in a limited amount for the trade, after the formula of M. Boudault, using only the rennet of calves. Fifteen grains of the powder contain three grains of pure pepsin.

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Wine of Pepsin carefully prepared from fresh calves' rennets. Each fluid ounce contains five grains of pepsin in solution in pure old Sherry wine.

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We are now manufacturing Hydrate of Chloral of undoubted purity in sufficient quantities to meet all demands on us. Our apparatus was designed by Dr. J. Lawrence Smith, under whose personal supervision it is made.

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Sweet Spirits of Nitre has fallen into disuse with many practitioners in consequence of its liability to decomposition. This is owing either to want of care in its manufacture, or, as is too often the case, from fraudulent additions of water to decrease its price. Water is injurious not only as a diluent, but is a most efficacious promoter of decomposition.

We have samples of this article, manufactured by us more than two years ago, which nave remained until now unchanged, although frequently exposed to light and air. This is due not only to the purity of the articles used in its manufacture, but also to the ingenous apparatus devised by Dr. Smith, which thoroughly frees the nitrous ether from every nitrous acid

Our Spts. Nit. Dulce contains five per cent. of pure ether.

SYRUP OF HYDRATE OF CHLORAL AND WILD-CHERRY.

Combining the sedative effect of wild cherry with the powerful hypnotic properties of hydrate of chloral. This has been used with great success by several of our leading physicians, at whose request we offer it to the profession.

Each dessert-spoonful contains the medicinal properties of thirty grains of wild cherry

and fifteen grains of hydrate of chloral in solution in glycerine and syrup.

SYRUP HYDRATE OF CHLORAL, HYOSCYAMUS AND VALERIAN.

This preparation has been used with much success in cases of insomnia caused by hysteric nervousness, mental depression, mania, female diseases, etc.

Each dessert-spoonful (two drachms) contains the remedial properties of fifteen grains

of chloral, five grains of hyoseyamus leaves, and twenty grains of valerian in solution in syrup and glycerine.

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A powerful general tonic, stomachic, readily assimilable chalybeate, well adapted to certain chlorotic and aniemic states, used in morbid conditions of the nervous system, chronic diseases of the kidneys, many forms of cutaneous diseases where a tonic effect is degired, and in cases of strumous children threatened with scrofulous degeneration, and ultimately with localized tubercular development. One grain of phosphate iron, one grain phosphate quinia, and one thirty-second grain phosphate strychnia to the drachm of syrup

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Recommended by Lr. Andrew Buchanan, of Glasgow, as a means of administering identification of the stomach. It contains one fourth of one per cent. of identifie, or about one and a half grains to the ounce.

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Suited to the treatment of anæmia, resulting from obstinate intermittent fevers, and scrofulous, syphilitic, and cancerous affections. Fifty grains mixed iodides to the ounce.

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ATOMIZATION OF LIQUIDS FOR INHALATION

LOCAL ANÆSTHESIA. &.c.

By the Atomizer any medicated liquid may be converted into the finest spray. In this state it may be inhaled into the smallest air-cells, thus opening a new era in the treatment of all diseases of the throat and lungs.

The Complete Steam Atomizer for Inhalation, &c.

BOSTON.

Fig. 15. Pat. Mar. 24, 1868 and Mar. 16, 1869.

(See Fig. 18.) It consists of the spear-shaped brass boiler A, steam outlet-tube B, with packing-box C formed to receive rubber packing through which the atomizing tube D passes, steam-tight, and by means of which tubes of various sizes may be tightly held against any force of steam by screwing down its cover while the packing is warm; the safetyvalve E, capable of graduation for high or low pressure by the spring or screw in its top, the non-conducting handle F, by which the boiler may be lifted while hot, the medicament-cup and cup-holder G, the support H, iron base I I, the glass face-shield J, with oval mouth-piece connected by the elastic band K with the cradle L, whose slotted staff passes into a slot in the shield-stand M M. where it may be fixed at any height or angle

required by the mill-screw N.

The waste-cup, medicament-cup and lamp are held in their places in such a manner that they can not fall out when the apparatus is carried or used over a bedor otherwise. All its joints are hard soldered. It can not be injured by exhaustion of water, or any attainable pressure of steam. It does not throw spirts of hot water to frighten or scald the patient. Is compact and portable; occupies space of one sixth cubic foot only; can be carried from place to place without removing the atomizing tubes or the water; can be unpacked and repacked without loss of time. Will render the best service for many years, and is cheap in the best sense of the word. Neatly made, strong, black-walnut box, with convenient handle, additional, 2.50

Shurtleff's Atomizing Apparatus. (See Fig. s.)



Fig. 5. Patented March 24, 1868.

For Inhalation, and, with suitable tubes, for Local Anæsthesia, and for making direct local applications of atomized liquids for a great variety of

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The most desirable hand apparatus. Rubber warranted of very best quality. Valves of hard rubber, every one carefully fitted to its seat, and work per-fectly in all positions. The Bulbs are adapted to all the Tubes made by us for Local Anæsthesia in Surgical Opera-tions, Teeth Extraction, and for Inha-PRICE.\$4.50 lation.

66 Each of the above Apparatuses is supplied with two carefully-made annealed glass Atomizing Tubes, and

accompanied with directions for use. Every Steam Apparatus is tested with steam at very high pressure. Each apparatus is carefully packed for transportation, and warranted perfect. Also.

THE BOSTON ATOMIZER, with two glass Atomizing Tubes

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Will be sent by mail (post-paid), on application, a Pamphlet containing two articles, by distinguished foreign authority, on

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Also an illustrated description of the best apparatuses for the above purposes, and for producing LOCAL AN ASTHESIA by Atomization with Ether; by the method of Dr. RICHARDSON, of London; or with Rhigolene, as described by Dr. Henry J Bigglow, in the Boston Medical and Surgical Journal of April 19, 1866.

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ALL OUR ATOMIZING INSTRUMENTS are made with the utmost care, with a view to their complete efficiency, convenience, and durability, and every one is warranted. A Gold Medal has lately been awarded us by the Middlesex Mechanics Association for Atomizing and Surgical Instruments, as will be seen from the following report, signed by a leading New England Surgeon and Physician:

"1503. Codman & Shurtleff, Boston. One Case Surgical Instruments and Atomisers.—
The Committee have no hesitation in awarding for this superb exhibition the highest premium. The various other intruments for Inhalation of Atomized Liquids and for Local Anæsthesia were all apparently faultless, both in design and workmanship. The exhibitors are regarded as more especially deserving of the highest token of merit for having produced qothing except of their own manufacture.—Gold Mcdal.

(Signed) GILMAN KIMBALL, M. D., Chairman."

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Skeletons, Skulls, and Anatomical Charts on hand; Manikins, Anatomical and Pathological Models imported to order; prices on application. All Instruments, Implements, and Materials used by Dentists always on hand. Apparatus for Club feet, Weak Ankles, Bow Legs, Spinal Curvature, and other deformities, made to order.

Bow Legs, Spinal Curvature, and other deformities, made to order.

Apparatus for Paracentesis Thoracis, approved by Dr. Bowditch, and accompanied with directions kindly furnished by him.

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Having our Manufactory with steam power, and a corps of experienced workmen connected with our store, we are able promptly to make to order new Instruments and Apparatus, and to supply new inventions on favorable terms. Instruments sharpened, polished and repaired.

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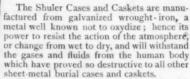
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